



**WALSALL**  
**COUNTY BOROUGH**  
**HEALTH REPORT**  
**1958**

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**THOMAS ROSS, M.B., Ch.B., D.P.H.**

Medical Officer of Health and  
Principal School Medical Officer



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# COUNTY BOROUGH OF WALSALL

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## HEALTH COMMITTEE

From May, 1958 to May, 1959

### CHAIRMAN:

Councillor D. M. Middleton

### VICE-CHAIRMAN:

Alderman E. A. Brockhurst, J.P.

Alderman R. Davies	Councillor L. Harrington
Alderman B. E. Hemmings	Councillor L. B. Parkes
Alderman M. J. Kavanagh, M.C.	Councillor A. M. M. Taylor
Councillor D. Cartwright	Councillor E. M. Thomas
Councillor W. Clarke	Councillor A. W. Toon

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## EDUCATION COMMITTEE

### CHAIRMAN:

Alderman T. P. Riley, J.P.

### VICE-CHAIRMAN:

Councillor F. F. Harrison.

Alderman E. A. Brockhurst, J.P.	Councillor J. A. Thompson
Councillor D. Cartwright	Councillor S. Wright
Councillor W. Clarke	Mrs. E. Wilkinson
Councillor M. Cox	Rev. J. M. Furness, B.D.
Councillor E. M. Flint	Rev. W. Sheeran
Councillor L. Harrington	Rev. V. S. Nicholls
Councillor M. C. Jarvis	Mr. A. W. Lester
Councillor D. M. Middleton	Mr. A. A. Owen
Councillor P. H. Musgrove	Mr. J. Robson
Councillor A. M. M. Taylor	Mr. C. Tomkinson

# STAFF

(at 31st December, 1958)

MEDICAL OFFICER OF HEALTH AND PRINCIPAL SCHOOL MEDICAL OFFICER ... ..	Thomas Ross, M.B., Ch.B., D.P.H.
DEPUTY MEDICAL OFFICER OF HEALTH ... ..	G. P. A. Evans, M.B., Ch.B., D.P.H.
SENIOR MEDICAL OFFICER FOR MATERNITY AND CHILD WELFARE	I. M. Brown, M.B., Ch.B., D.P.H., M.M.S.A., D.R.C.O.G., D.C.H.
ASSISTANT MEDICAL OFFICERS OF HEALTH ... ..	M. D. Wigley, M.B., Ch.B., D.C.H. J. R. White, L.R.C.P., L.R.C.S., D.P.H. S. J. Toogood, M.B., B.S.
PRINCIPAL SCHOOL DENTAL OFFICER	R. E. Morgan, L.D.S.
SCHOOL DENTAL OFFICER ... ..	Mrs. I. M. Millar, L.D.S.
CHIEF PUBLIC HEALTH INSPECTOR	C. A. Stansbury.
DEPUTY CHIEF PUBLIC HEALTH INSPECTOR ... ..	E. Bayley.
Staff ... ..	12 Public Health Inspectors. (11 Full-time, 1 Part time). 3 Pupil Public Health Inspectors. 6 Clerks.
PUBLIC ANALYST ... ..	F. G. D. Chalmers, MA., B.Sc., F.R.I.C.
DEPUTY PUBLIC ANALYST ... ..	C. N. Grange, B.Sc., F.R.I.C.
SUPERINTENDENT HEALTH VISITOR Staff ... ..	Miss G. Johnson. 11 Health Visitors. 1 Acting Health Visitor. 3 Pupil Health Visitors. 1 Tuberculosis Visitor. 3 Clinic Nurses (Part-time). 3 School Nurses.
SUPERVISOR OF MIDWIVES Staff ... ..	Mrs. M. E. Smith. 16 Municipal Midwives.
ADMINISTRATIVE ASSISTANT Staff ... ..	H. D. Parsons. 10 Clerks (8 Full-time, 2 Part-time). 4 Sales Clerks—Part-time.
DULY AUTHORIZED OFFICER (MENTAL HEALTH SERVICE) ...	F. H. Parker. 1 part-time Deputy.
SENIOR MENTAL WELFARE OFFICER	Miss F. Grant. 1 Assistant.
SUPERVISOR OCCUPATION CENTRE	Miss E. Ratford. 2 Assistants.
MATRONS—DAY NURSERIES ...	Mrs. N. Clark. Mrs. C. Morton.
AMBULANCE SUPERVISOR ... ..	H. J. Addison.
LADY SUPT.—HOME NURSING Staff ... ..	Miss R. E. Bennion. 9 District Nurses. 4 District Nurses—Part-time.



# COUNTY BOROUGH OF WALSALL

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## ANNUAL REPORT OF THE Medical Officer of Health

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TO THE MAYOR, ALDERMEN AND COUNCILLORS OF THE COUNTY  
BOROUGH OF WALSALL.

Mr. Mayor, Ladies and Gentlemen,

I present herewith my Annual Report on the health of the County Borough of Walsall during the year 1958.

Following upon the departure of Dr. H. C. Milligan in February to a new appointment the staffing position was not fully restored until October.

Broadly speaking there is little change to note this year as compared with 1957. Infantile mortality, the general death rate and mortality from tuberculosis remains at about the previous levels. The two maternal deaths recorded, however, represent a rate for Walsall about twice the national level but investigation into the circumstances attending these deaths show they were in no wise due to any deficiency in the obstetric services. It will also be noted that contrary to our experience in recent years, we have had one death attributed to diphtheria in a school child but from information acquired subsequent to the certification of this death, I have good grounds for doubting whether diphtheria was even a contributory cause of death.

### THE FIRST TEN YEARS OF THE NATIONAL HEALTH SERVICE.

Much has been said in the past in connection with the co-operation between the Local Health Authority, Hospitals and General Practitioners, and much has been achieved in this direction over the last ten years since the introduction of the National Health Service Act, 1946. As far as Walsall is concerned our aim is to introduce any arrangements which may improve this co-ordination and this aim is pursued as far as possible.

A Liaison Committee comprised of representatives of the Hospital services, Executive Council, Local Medical Committee and Walsall Town Council is in operation and all aspects of the health services of the borough are brought under review and recommendations made for

improvement of close working arrangements between the various services.

Co-ordination arrangements include the constant notification upon discharge from hospital of babies born in hospital, of children under the age of five years and school children. Copies of hospital consultants' reports on children referred to them are passed to the Medical Officer of Health for information and any necessary follow-up which may be required.

The Medical Officer of Health is a member of the Local Medical Committee and so has an opportunity to discuss with general practitioners any aspects of the Local Health Service which may arise, whilst they in turn are able to offer any suggestions for improved co-ordination. The close co-operation which exists between Hospitals, General Practitioners and the Local Authority's Nursing Staff in Walsall has provided for the efficient functioning of the Midwifery, Health Visiting and Home Nursing Services during the last ten years.

General Practitioners have been kept up to date with any new schemes brought into operation in the Local Health Authority Services, and their ready co-operation has always been forthcoming.

Generally, I would say that the teething troubles which affected the efficient co-ordination of the Health Service during the initial period following the inception of the National Health Service Act, 1946 are gradually being overcome and the ultimate aim of all bodies concerned to work as a complete unit is much nearer achievement.

In conclusion I wish to place on record my appreciation of the support given by the Chairman and members of the Health Committee and to thank the staff of the department for their efforts during the year.

I would further take this opportunity of placing on record our deep appreciation of the great services rendered to the department by Mr. P. Shoesmith, the Administrative Assistant, who terminated his appointment in November of this year after 30 years service with your Authority. He left the department with the very best wishes of the staff and members of the Health Committee for a happy and fruitful retirement.

I am, Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

THOMAS ROSS,

Medical Officer of Health.

Health Department,  
Council House,  
Walsall.

Telephone No.: Walsall 6561-3.

## SUMMARY OF STATISTICS

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### 1. General Statistics

Areas in Acres	...	...	...	...	...	...	8,780
Population	...	...	(At Census 1951)	...	...	...	114,535
Number of Structurally Separate Dwellings (At Census 1951)	...	...	...	...	...	...	31,380
Number of Families	...	...	(At Census 1951)	...	...	...	32,425
Population 1958 (estimated)	...	...	...	...	...	...	115,000
Rateable Value (1/4/1959)	...	...	...	...	...	...	£1,311,330
Sum represented by a Penny Rate (1959/60)	...	...	...	...	...	...	£5,300
Population per Acre	...	...	...	...	...	...	13.1

### 2. Extracts from Vital Statistics

Number of Live Births Registered	M., 1,098	F., 1,026	2,124
Live Birth Rate per 1,000 population ...	...	...	18.47
Do. (standardised)	...	...	17.55
Number of Still-births	...	M., 28 F., 23	51
Still-birth rate per 1,000 Live and Still-births	...	...	23.08
Total Live and Still-births	...	M., 1,126 F., 1,049	2,175
Infant Deaths ...	...	M., 30 F., 28	58
Infant Mortality Rate per 1,000 Live Births	...	...	27.31
Do. (Legitimate)	...	...	25.69
Do. (Illegitimate)	...	...	60.0
Neo Natal Mortality Rate per 1,000 Live Births	...	...	21.66
Illegitimate Live Births per cent. of Total Live Births	...	...	4.71
Maternal Deaths (including abortion)	...	...	2
Maternal Mortality Rate per 1,000 Live and Still-Births	...	...	0.92
Number of Deaths (all ages)	M., 635	F., 536	1,171
Death Rate per 1,000 Population	...	...	10.18
Standardised Death Rate	...	...	12.11



## Coroner's Inquests

The number of deaths reported to the Coroner during the year was 251 (171 males and 80 females).

Deaths investigated by the Coroner but no inquest held, 137.  
 POST-MORTEM EXAMINATIONS ordered by Coroner ... 239

### VERDICTS RETURNED AT INQUESTS:—

	M.	F.
Death by Murder ... ..	—	—
„ „ Suicide ... ..	6	5
„ „ Manslaughter ... ..	—	—
„ „ Self-induced Abortion ... ..	—	—
„ „ Neglect ... ..	—	—
„ „ Want of attention at Birth ... ..	—	—
„ „ Want, Exposure, etc. ... ..	—	—
„ „ Accident or Misadventure ... ..	42	28
Death from Natural Causes ... ..	11	2
Death from Industrial Diseases ... ..	17	—
Stillborn ..... ..	—	—
Open Verdicts ... ..	3	2
	<hr/> *79	<hr/> 37

1 inquest adjourned and not resumed.

1 death reported during the year will be dealt with in 1959 verdicts.

\* Includes verdicts on 4 deaths reported in 1957.

## Vital Statistics

The number of births in the Borough during 1958 increased by 129 as compared with 1957, giving a corresponding rate increase of 1.09 per thousand population. The Birth Rate of 18.47 for Walsall is much in excess of the figure for England and Wales of 16.4 per thousand population.

The Death Rate of 10.18 per thousand population showed a considerable decrease over last year's rate of 11.07, 100 fewer deaths being recorded. The Death Rate for England and Wales for 1958 was 11.7 per thousand population.

The Infant Mortality Rate for the year was 27.31 per thousand births, as compared with 26.57 in 1957, the figure for England and Wales for 1958 being 22.5.

# CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE IN WALSALL COUNTY BOROUGH 1958

As furnished by the Registrar-General

CAUSES OF DEATH		Sex	All Ages	0-	1-	5-	15-	25-	45-	65-	75-
ALL CAUSES	.. ..	M. F.	635 536	30 28	3 3	6 4	5 4	38 23	175 106	173 140	205 228
1. Tuberculosis—Respiratory	.. ..	M. F.	9 3	— —	— —	— —	— —	— 1	6 1	2 —	1 1
2. Tuberculosis—Other	.. ..	M. F.	1 1	— —	1 1	— —	— —	— —	— —	— —	— —
3. Syphilitic Disease	.. ..	M. F.	1 —	— —	— —	— —	— —	— —	1 —	— —	— —
4. Diphtheria	.. ..	M. F.	1 —	— —	— —	1 —	— —	— —	— —	— —	— —
5. Whooping Cough	.. ..	M. F.	— 1	— 1	— —	— —	— —	— —	— —	— —	— —
6. Meningococcal Infections	.. ..	M. F.	— —	— —	— —	— —	— —	— —	— —	— —	— —
7. Acute Poliomyelitis	.. ..	M. F.	— —	— —	— —	— —	— —	— —	— —	— —	— —
8. Measles	.. ..	M. F.	1 —	1 —	— —	— —	— —	— —	— —	— —	— —
9. Other Infective and Parasitic Diseases	.. ..	M. F.	1 3	— —	— —	— —	— —	— —	— 1	— 1	— 1
10. Malignant Neoplasm—Stomach	.. ..	M. F.	15 15	— —	1 —	— —	— —	4 —	4 4	4 4	3 7
11. " " Lung, Bronchus	.. ..	M. F.	49 3	— —	— —	— —	— —	1 —	29 3	16 —	3 —
12. " " Breast	.. ..	M. F.	— 13	— —	— —	— —	— —	— 1	— —	— —	— 2
13. " " Uterus	.. ..	F. F.	9 —	— —	— —	— —	— —	1 1	5 4	4 —	— —
14. Other Malignant and Lymphatic Neoplasms	.. ..	M. F.	52 44	— —	— —	1 —	— —	5 2	16 11	13 14	17 17
15. Leukæmia, Aleukæmia	.. ..	M. F.	6 1	— —	— —	1 —	— —	2 1	1 —	1 —	1 —





# CASES OF INFECTIOUS DISEASES NOTIFIED DURING THE YEAR 1958

NOTIFIABLE DISEASE	CASES NOTIFIED IN WHOLE DISTRICT												TOTAL CASES NOTIFIED IN EACH WARD									
	At All Ages	At Ages—Years											Bloxwich Ward	Leamore Ward	Blakenall Ward	Birchills Ward	Hatherton Ward	Paddock Ward	Bridge Ward	Pleck Ward	Caldmore Ward	Palfrey Ward
		Under 1	1 to 2	2 to 3	3 to 4	4 to 5	5 to 10	10 to 15	15 to 25	25 to 35	35 to 45	45 to 65										
Small-Pox..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas..	19	—	—	—	—	—	—	—	1	1	13	4	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	118	1	—	3	12	6	74	21	1	—	—	—	—	—	—	—	—	—	—	—	—	—
Enteric Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Paratyphoid	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles ..	1015	45	123	131	127	143	436	7	2	—	1	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough..	214	31	25	27	28	26	72	3	—	1	1	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	1	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—
Meningococcal Infection	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—



## INFECTIOUS DISEASES

---

### Diphtheria

Our good record of freedom from Diphtheria was unfortunately upset by the death of a 14 year old boy, a contributory cause of death being stated as Diphtheria only after a post mortem examination. Whilst accepting this diagnosis for record purposes, I can only reiterate my doubts as to this conclusion.

### Scarlet Fever

118 cases of Scarlet Fever were notified during the year, as compared with 37 in the previous year. There were no deaths.

### Measles

1,015 cases of Measles were notified during the year, a decrease as compared with last year's figure of 1,282.

### Whooping Cough

214 cases of Whooping Cough were notified as compared with 458. There was one death.

### Acute Poliomyelitis

No cases of poliomyelitis were notified during the year.

### Acute Primary and Influenzal Pneumonia

156 cases were notified as compared with 245. There were 48 deaths from this cause during the year, a decrease of 28 as compared with 1957. Influenza accounted for 12 deaths as compared with 28 in the previous year.

### Dysentery

52 cases of Dysentery were notified as compared with 6 during 1957. Outbreaks of Dysentery occurred towards the end of the year and in most cases occurred amongst large families where the infection was passed throughout the household.

### Other Diseases

19 cases of Erysipelas, 5 cases of Ophthalmia Neonatorum and 1 case of Puerperal Pyrexia were notified during the year.

### Food Poisoning

3 cases of Food Poisoning were notified during the year.



## NURSING HOMES

---

At the end of the year there were no nursing homes registered under the Public Health Act, 1936.

There is one Home for Disabled and Old Persons, registered under the National Assistance Act, 1948.

The Senior Medical Officer has paid four visits during the year.

## SCABIES TREATMENT

---

The Scabies Clinic at Hatherton Road is still maintained and during the year the number of cases attending increased as compared with the previous year.

During the year 6 men, 4 women and 18 children received treatment, these cases making a total number of 80 attendances for this purpose.

## CLEANSING OF PERSONS

---

Cleansing of unclean persons was carried out at the Cleansing Station at the Ambulance Station in Hatherton Road and during the year 9 persons were treated.

## MEDICAL EXAMINATIONS

---

The medical staff of the health department carry out medical examinations on behalf of the various corporation departments on candidates for admission to the superannuation scheme and also act as medical examiners in cases where corporation employees are reported to be medically unfit to continue in the Council's service. The following table shews the number of medical examinations carried out during the year:—

Transport Department	...	...	...	...	...	338
Education Department	...	...	...	...	...	159
Public Works Department	...	...	...	...	...	76
Health Department	...	...	...	...	...	39
Housing Department	...	...	...	...	...	38
Children Department	...	...	...	...	...	15
Town Clerk's Department	...	...	...	...	...	2
Borough Treasurer's Department	...	...	...	...	...	5
Fire Department	...	...	...	...	...	7
Baths, Parks and Cemeteries Department	...	...	...	...	...	10
Welfare Department	...	...	...	...	...	8
Police Department	...	...	...	...	...	9
Public Libraries	...	...	...	...	...	4
Civil Defence Department	...	...	...	...	...	3
Other Authorities	...	...	...	...	...	2
						<hr/> 715 <hr/>

## NURSERIES AND CHILD-MINDERS

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The Nurseries and Child-minders Regulations Act, 1948, provides for the registration of nurseries and child-minders where children numbering more than 2 and who come from more than one household are cared for. The Act does not apply to the care of children by relatives.

The care of such children in Walsall has never been a serious problem and up to the end of the year no premises or persons had been registered under the Act.

## PATHOLOGICAL EXAMINATIONS

---

The arrangement for the examination of pathological and bacteriological specimens by the National Laboratories Service has continued throughout the year. The laboratory, situated at Stafford, is directed by the Medical Research Council for the Ministry of Health, and the service is a complete one covering all our possible requirements.

The medical staff of the Health Department send specimens for examination regularly and the service is also open to any of the local medical practitioners.

The bacteriological examination of milk and other specimens is also carried out.



## CREMATION

---

The Medical Officer of Health is the Medical Referee to the Walsall Corporation under the regulations made in pursuance of the Cremation Act, 1902, and is responsible to the Corporation for the final authority to cremate.

During 1958 certificates were given in respect of 329 deaths of persons who had resided in Walsall and 268 in respect of persons who had resided outside the Borough, a total of 597.

As it not always possible for the Medical Officer of Health to be present on all occasions when authority to cremate is required, authority was requested for the appointment of deputies to act in his absence, and the Deputy Medical Officer of Health and the Senior Medical Officer for Maternity and Child Welfare have been appointed Approved Deputies by the Council with the sanction of the Home Office.

## NATIONAL ASSISTANCE ACT, 1948—SECTION 47

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Action was taken under the procedure as modified by the National Assistance (Amendment) Act, 1951 in respect of two persons, who were in need of care and attention and refused to enter Part III accommodation voluntarily. The appropriate certificates were issued in each case and compulsory removal carried out.

## VENEREAL DISEASES

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The Venereal Diseases Clinic is situated at Manor Hospital, Walsall, the Hospital Management Committee being responsible for the work carried out at the clinic.

We are, however, still concerned with the incidence of Venereal Diseases in the town and continue to work in close co-operation with the Venereologist.

The following table shows the work of the Venereal Diseases Clinic during the year:—

TABLE SHOWING THE WORK OF THE VENEREAL DISEASES CLINIC DURING THE YEAR 1958

	Syphilis		Gonorrhoea		Conditions other than Venereal		Totals		Totals
	M.	F.	M.	F.	M.	F.	M.	F.	
Number of cases on Register 1st January, 1958	29	26	24	6	46	116	99	148	247
Number of old cases returned for treatment or observation of same infection	1	1	—	—	—	—	1	1	2
Number of new cases dealt with for the first time	21	9	110	20	159	219	290	248	538
Number of new cases transferred from other centres	1	4	2	1	—	—	3	5	8
Total cases dealt with	52	40	136	27	205	335	393	402	795
Attendances—Medical examinations	634	225	753	81	2358	1039	3745	1345	5090
Irrigation, dressings	252	88	173	1	675	1550	1100	1639	2739
Total attendances	886	313	926	82	3033	2589	4845	2984	7829
Number of new cases attending during 1958	23	7	110	20	206	172	339	199	339
Walsall	..	..	..	..	..	..	..	..	199
Other areas	..	..	..	..	..	..	..	..	339
Pathological Work —									
Specimens examined at Walsall Treatment Centre	..	138	1636	17	—	925	—	905	1
Specimens examined at a Pathological Centre	..	—	—	—	—	—	—	—	1

## HEALTH EDUCATION

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Our campaign of health education has continued throughout the year by means of posters, lectures and talks to various groups. Posters are obtained from various sources and are displayed at welfare centres, clinics and waiting rooms in the Council House.

The availability of all types of vaccination and immunisation has been widely publicised by means of posters, circulars to schools, distribution of leaflets and invitations and by Press advertisements.

Particular attention has been paid to poliomyelitis vaccination and our efforts have met with a good response. The most effective means of health education is without doubt the personal contact which is made by the doctors and nurses with members of the public, in fact every member of the Health Department staff dealing with the public in some way contributes towards health education publicity.

The Superintendent Health Visitor has lectured to 21 organisations on various aspects of public health and the services which are available, these lectures being much appreciated. Not the least part of their value is the discussion which follows the formal lecture, where the department's point of view can so often be well expressed. In addition the health visiting staff gave 4 talks to various organisations and 3 courses of lectures to St. John Cadets. Four other health visitors gave talks on home nursing to Civil Defence volunteers.

Weekly mothercraft classes were continued for young mothers expecting their first baby, the course of seven lectures being given by the health visiting and midwifery staff. The lectures cover all aspects of ante-natal care, preparation for confinement and the care of the mother and baby during the first fourteen days after confinement, at the conclusion of which a film "The Birth of a Baby" is shown. The wide interest shown in our fathercraft class, to which the final session of the above course is devoted, was indicated by the fact that the B.B.C. sent their unit to film a fathercraft session in progress.

The Health Department has its own film projector and from time to time suitable films are shown during the course of lectures, there being a number of useful films available for this purpose. The officers concerned, medical and nursing staff in particular, often give freely of their own time for these lectures and thanks are due to these officers for their enthusiasm and concern for this aspect of our work.

Although we are limited in the amount of time which can be given to health education owing to the shortage of staff, we are always willing to arrange for film shows or lectures to be given to any group which requests this service.



## CARE OF MOTHERS AND YOUNG CHILDREN

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Dr. I. M. Brown, Senior Medical Officer of Health for Maternity and Child Welfare reports as follows upon the work in her section:—

“I am pleased to report that the steady improvement in our Maternity and Child Welfare Services has been maintained during 1958.

The infant mortality rate has risen slightly from 26.57 to 27.31 per thousand live births. The still-birth rate shows an improvement, there being 51 still-births in 1958 as against 63 in 1957. Investigations were carried out into 50 still-births and it was found that 54 per cent. of these were attributed to causes which occurred during the pre-natal period and 38 per cent. during labour. In the remaining 8 per cent. the cause was unknown. We can again reach the conclusion that there is still much work to be done in the ante-natal field.

Unfortunately our good record of two years without a maternal death was spoilt by the occurrence of two such deaths during 1958. We are still faced with the fact that deaths due to pregnancy are likely to occur even with the present high standard of ante-natal care.

Considerable attention is still being given to the improvement of our ante-natal services, and it is pleasing to note that co-operation between the various bodies responsible for these services is progressing satisfactorily in Walsall. More mothers are taking advantage of the services provided for their benefit, thus providing midwives with the opportunity of seeing their patients and keeping well informed of their progress during pregnancy.

53 per cent. of the births in the Borough were delivered by district midwives employed by the Local Authority, representing a total of 1,063 domiciliary births. In addition the nursing of 864 mothers discharged from maternity hospitals before the fourteenth day after confinement was carried out.

Health Education of the expectant mother is of great importance and we feel that in Walsall a great deal is being done to educate ante-natal patients on how to care for themselves during pregnancy. Midwives, along with health visitors, take part in mothercraft lectures to expectant mothers and one of the sessions during the short course is allotted to the husbands of the expectant mothers. Films are shown in addition to lectures and the lively discussions which follow indicate that the information obtained by ante-natal patients is of considerable value and that the course is most appreciated.

The dental service for expectant and nursing mothers and children under 5 years of age is also much appreciated, and the number of women and children accepting treatment shows a tendency to increase.

Although the attendances at Child Welfare centres has shown an increase we feel that there is still room for improvement. The advice given to nursing mothers by staff specially trained for this purpose is invaluable, particularly to the mother with her first baby, and we feel that more advantage could be taken of the facilities provided.

Vaccination against smallpox and immunisation against whooping cough, diphtheria and poliomyelitis is available at these centres."

**Attendances Registered at the Child Welfare Centres  
during 1958**

CENTRE	Under 6 months		6—12 months		1—2 years		2—5 years		Total		New Cases
	A.	M.	A.	M.	A.	M.	A.	M.	A.	M.	
Pool St.	1775	649	911	383	548	190	267	85	3501	1307	242
F'ld Rd.	2709	617	1492	515	702	199	215	63	5118	1394	373
L'ton St.	1754	704	900	448	332	178	210	86	3196	1416	269
C'tess St.	2753	854	1511	453	684	208	641	91	5589	1606	305
Ida Rd.	1194	433	665	291	401	165	317	98	2577	987	156
D'dley's Fields'	1197	444	537	235	223	78	161	39	2118	796	177
<b>Totals</b>	<b>11382</b>	<b>3701</b>	<b>6016</b>	<b>2325</b>	<b>2890</b>	<b>1018</b>	<b>1811</b>	<b>462</b>	<b>22099</b>	<b>7506</b>	<b>1522</b>

A.—Attendances.

M.—Medical Examinations

**Attendances Registered at the Ante-Natal and Post-Natal Clinics  
during 1958**

	Pool St.		Field Rd.		Countess Street		Ida Rd.		Littleton Street		Totals	
	A.	M.	A.	M.	A.	M.	A.	M.	A.	M.	A.	M.
Ante-natal Cases	284	217	1313	830	844	634	372	261	1156	805	3969	2747
Ante-natal New Cases	88		473		260		103		388		1312	
Post-natal Cases	—	—	2	2	—	—	—	—	1	1	3	3
Post-natal New Cases	—		2		—		—		1		3	

A.—Attendances.

M.—Medical Examinations



## CHILD WELFARE CENTRES

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There are six child welfare centres in Walsall at which eleven sessions are held weekly, attended by a doctor and health visitors. There are no special consultant clinics, children requiring specialist opinion being referred to one of the general hospitals in the town. No arrangements have been made for joint clinics with general practitioners in their own premises. Whilst attendances are not as satisfactory as we would like, nevertheless they must be accounted reasonably good taking into account the services provided by general practitioners under the health service.

Talks on mothercraft are given regularly to senior school children at our child welfare centres and these talks are followed by suitable demonstrations by the health visitors. We regretfully have to report that the special sewing class sessions which have been held for some years have declined in popularity and there is only now one special sewing class for mothers held at one of our welfare centres.

At the time of writing the new Beechdale Clinic is in operation and, although there is room for improvement in attendances, it is felt that by the end of 1959 figures will have justified the erection of this modern building. We are now looking forward to the approval of the Ministry for a similar Clinic to serve the residents of Coalpool.

The total number of attendances made by health visitors at local health authority clinic sessions during the year was 1,525.

## DENTAL TREATMENT

The Council's proposals under Section 22 of the National Health Service Act provide for every expectant mother to be examined by a Dental Practitioner following her first attendance at an Ante-Natal Clinic, for the periodic examination of children under the age of five years and for the necessary treatment to be provided where required, particular attention to be paid to conservative treatment.

During the year 58 dental sessions were devoted to maternity and child welfare patients, 130 expectant and nursing mothers were examined and all were found to require treatment. 110 of these patients attended the Dental Clinic and at the end of the year 51 cases had completed their course of attendances. 21 complete dentures and 17 partial dentures were provided. 61 children under the age of 5 years were examined and 58 were found to need treatment, 52 of whom were treated and made dentally fit.

## DAY NURSERIES

There are two day nurseries, one situated at the Bescot Methodist School and the other at the Blakenall Congregational School, both nurseries having been open throughout the whole year.

Mainly the nurseries are now used by priority classes, and for such cases a specially reduced scale of charges has been instituted by the Health Committee.

At the time of writing plans are well in hand to open a central day nursery at the Leckie Memorial Home to replace the two existing day nurseries. This will be a much more economic proposition in view of the dwindling attendances, and will, of course, reduce maintenance and running costs which were becoming excessive at the existing establishments.

The following table shows the average attendances at the nurseries during the year:—

Day Nursery	No. on Register at 31/12/58	Total No. of attendances	Average daily attendances
Bescot ... ..	23	3,196	13.1
Blakenall ... ..	14	2,655	10.9

## Maternity Outfits

The provision of a maternity outfit to each expectant mother confined at home has been continued, and during the year 1,130 outfits have been issued. The composition of the pack is as follows:—

12 Extra Large Maternity Pads, 24 Large Maternity Pads, individually wrapped, 1 Sheet Tarred Brown Paper, 30 x 36, 1 Accouchment Sheet, 24 x 24, 4 2-oz. packets Surgeons Wool, 3 1-yd. Linen Thread, 6 Cord Dressings (5 x 5 lint), 6 packets Sterilised Cord Powder.

The distribution of the outfits is made through the Municipal Midwives, a sufficient stock being maintained by them to meet all possible needs. There is no doubt the provision of these outfits has been of great benefit to mothers whose confinements are to take place at home and we know they are very much appreciated. The Midwives, also, are assured of adequate equipment for the confinement, together with sterile dressings, and their work has been facilitated accordingly.

### Provision of Foods

The Council is responsible for the distribution of National Dried Milk, Orange Juice, Cod Liver Oil and Vitamin Tablets in addition to their normal sale of welfare foods, etc.

Arrangements were made for the distribution of the national foods at the normal welfare centre sessions and we are satisfied that this arrangement is providing an efficient and economical service. All foods are available at these sessions so that mothers have the opportunity of consulting either the doctor or the health visitor at the same time that they receive their foods. From our point of view it gives an opportunity for closer supervision and regular contact with infants and children. Five part-time women are employed on this work.

The following table shows the types and amounts of food sold during the year at the Welfare Centres and it will be noted that full provision has been made for every type of food to be sold to meet the individual child's needs.

39,053 tins	Full Cream National Dried Milk.
146 tins	Half Cream National Dried Milk.
8,047 bottles	Cod Liver Oil.
6,306 pkts.	Vitamin Tablets.
57,206 bottles	Orange Juice.
4,783 lb.	Cow and Gate Dried Milk.
8,073 lb.	Ostermilk.
1,332 lb.	Trufood.
180 tins	Lactogol.
1,289 tubs	Virol.
3,396 tins	Ovaltine.
151 lb.	Malt and Oil.
1,156 pkts.	Farex.
697 pkts.	Scotts Cereal Infant Food.
235 pkts.	Groats.
181 pkts.	Robrex.

In addition, should any child need a special food, even for only a limited period, steps are immediately taken to obtain a supply, though the purchase of such foods may occasionally involve the department in a slight financial loss.



## UNMARRIED MOTHERS AND CHILDREN

### Care of Illegitimate Children

The Walsall County Borough, as the Welfare Authority, is a constituent authority of the Staffordshire County Council Scheme for the care of illegitimate children and their mothers.

34 cases in which illegitimate births occurred in 1958 have been dealt with by Sister Ellis and these are reported on below. In addition 18 cases in which births occurred prior to 1958 were helped in various ways, including making plans for adoption, obtaining payments from putative fathers and finding lodgings. 11 expectant mothers whose babies were due to be born in 1959 had the necessary arrangements made for their confinements. This makes a total of 63 cases under care at the end of the year.

18 mothers were accommodated in Diocesan Homes.

2 in Roman Catholic Homes.

1 in a Salvation Army Home.

3 went into hospital for confinement.

4 remained in their own homes.

6 of the cases concerned married women; of this number 1 was divorced, 2 were separated and 3 were reconciled with their husbands.

1 girl married the father of her baby.

Although every effort was made to trace putative fathers and to get payment from them only four Affiliation Orders were obtained; some men made voluntary payments until the adoption of the baby.

3 cases concerned girls of 15 years of age, 4 of 16, and 2 of 17; the remainder ranged between the ages of 18 and 34. The ages of the putative fathers ranged between 18 and 45.

The babies were placed as follows:—

18 with their parents at home.

1 with parents married.

3 with their mothers in Homes.

1 with parents co-habiting.

8 were adopted through the Association.

2 were adopted through a Roman Catholic Society.

1 died.

In all cases we are satisfied that the babies are thriving and well cared for.

It is estimated that 350 visits have been paid in connection with the 63 cases dealt with in 1958. Adopters' homes in the area have been visited and reported on and those babies placed for adoption

visited during the probationary period. In most cases, girls have been conveyed to Homes and accompanied when they have had to appear in Court or to have their signatures witnessed by a J.P. when consenting to an Adoption Order being made.

### **PREMATURE INFANTS**

Notifications were received in respect of 189 infants whose birth weight was  $5\frac{1}{2}$  lb or under, an increase of 12 over the previous year. In some cases the notifications applied to infants who, although the birth weight was  $5\frac{1}{2}$  lb. or less, were really full-term, but these infants were given the same care as those prematurely born.

Of the 189 infants notified 84 were born at home, 103 in hospital, and 2 in private nursing homes. There were 8 sets of twins. Seven of the infants born at home were transferred to hospital. One of the 77 infants nursed entirely at home died in the first 24 hours and 75 survived at the twenty-eighth day. Two of the 7 infants who were born at home and transferred to hospital, died in the first 24 hours and 1 survived at the twenty-eighth day.

Eleven of the 103 infants born in hospital died in the first 24 hours and 87 survived at the end of 28 days.

The 2 infants born and nursed in private nursing homes survived at the end of 28 days.

Of the 58 infants who died under the age of one year, 18 were certified as having died from prematurity, all of which were of low birth weight.

There were 24 notifications of premature still-births, 19 of these being born in hospital and 5 at home.

### **Emergency Maternity Service**

Arrangements are in force for the services of an emergency team of doctors and nurses from Manor Hospital with the necessary equipment, to attend complicated cases of labour on the district when required.

### **Maternal Mortality**

There were 2 maternal deaths during the year. The death rate was 0.92, compared with 0.43 for England and Wales.

### **Infectious Diseases**

There were 5 cases of Ophthalmia Neonatorum notified during the year. After treatment the vision was unimpaired and the infants made a good recovery.

There was 1 case of Puerperal Pyrexia notified during the year.

### **Care of Premature Infants**

The hospital provision for the care of premature infants is adequate and premature infants are transferred to hospital whenever necessary. To those premature infants remaining at home, special nursing care is given by midwives and by the health visitors.

### **INFANT MORTALITY**

The infant death rate per thousand births was 27.31 for 1958, an increase over the rate for 1957 which was 26.57. The infant death rate per thousand births for illegitimate infants was 60.0. The infant death rate per thousand births for England and Wales was 22.5.

An examination of the table relating to infant mortality reveals that nearly 80 per cent. of deaths of children under one year of age occurred during the first four weeks of life, 46 out of a total of 58 dying during this period.

Of the total of 58 infant deaths, 18 were from prematurity, 15 from congenital malformations and 6 from diseases peculiar to infants; 67 per cent. of the deaths were due to these three causes, which again points to the need for the highest standard of ante-natal care and the strictest co-ordination of all the bodies dealing with the expectant mother.



# INFANT MORTALITY DURING THE YEAR 1958 Deaths from stated Causes at various ages under One year of age

CAUSES OF DEATH	Total Deaths under 1 year	Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under 4 weeks	1 & under 3 months	3 & under 6 months	6 & under 9 months	9 & under 12 months	Bloxwich	Leamore	Blakenall	Birchills	Hatherton	Paddock	Bridge	Pleck	Caldmore	Palfrey
Measles .. .. .	1	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—	—
Whooping Cough .. .. .	1	—	—	—	—	—	—	—	1	—	—	1	—	—	—	—	—	—	—	—
Other Common Infectious Diseases .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diarrhoea and Enteritis .. .. .	1	—	—	1	—	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—
Premature Birth .. .. .	18	18	—	—	—	18	—	—	—	—	1	4	1	1	3	—	3	2	—	3
Congenital Malformations .. .. .	15	6	1	4	—	11	1	2	1	—	3	2	1	1	1	1	—	4	—	2
Infant Diseases .. .. .	6	6	—	—	—	6	—	—	—	—	—	2	1	—	—	1	—	1	—	1
Influenza .. .. .	1	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—	—	—
Pneumonia .. .. .	4	2	—	—	—	2	—	1	1	—	—	2	1	—	—	—	1	—	—	—
Bronchitis .. .. .	1	—	—	—	—	—	1	—	—	—	—	—	—	1	—	—	—	—	—	—
Accidents .. .. .	1	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—	—	—
Other Causes .. .. .	9	6	1	—	1	8	—	—	1	—	—	1	2	—	1	2	1	1	—	1
Totals .. .. .	58	38	2	5	1	46	2	5	5	—	4	15	7	3	5	4	5	8	—	7

Nett Births in the Year — Legitimate, 204 ; Illegitimate, 100.  
 Nett Deaths in the Year of Legitimate Infants, 52 ;    Illegitimate Infants, 6.

## MIDWIFERY SERVICE

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The Council operates a Municipal Midwifery Service, the staff of which consisted of 1 Supervisor and 16 Midwives at the end of the year. The service is under the medical supervision of the Senior Medical Officer for Maternity and Child Welfare and under the constant supervision of the Supervisor of Midwives. For all practical purposes there are no domiciliary midwives employed other than those engaged by the authority.

All the midwives are qualified to administer analgesics, having received their training either at the Birmingham Maternity Hospital, where special courses were arranged, or as part of their S.C.M. qualification. Six gas and air outfits are available to women at confinement and during the year the apparatus was in use on 496 occasions. The use of Pethedine by the Midwives, commenced in 1951, has been continued, the drug being administered to 614 patients. During 1958 four sets of "Trilene" analgesic apparatus have been used on 266 occasions.

The midwives arrange for the ante-natal supervision of their cases at the ante-natal clinics under the supervision of the Senior Medical Officer for Maternity and Child Welfare, and we are much more satisfied at the close collaboration which results therefrom.

The good co-operation between our Ante-natal Clinics and patients' own doctors is being maintained. Members of our health visiting and midwifery staffs have continued to attend experimental ante-natal clinics of four general practitioners. We have continued to co-operate in the scheme whereby social reports on applicants for maternity home accommodation are submitted by health visitors to assist in the selection of cases for admission to maternity hospitals.

The Health Department also co-operates with the Manor Hospital in the training of pupil midwives, the district training being carried out under the supervision of the Supervisor of Midwives.

During 1958 the number of pupils midwives completing their midwifery district training was 10, and we are pleased to report that all pupils were successful in their Final State Certified Midwives Examination.

The Deputy Medical Officer of Health gives lectures to pupil midwives on public health subjects as part of their curriculum.

Of the total notified births (2,087 live and 47 still-births) relating to Walsall women, 1,063 were by Municipal Midwives and 1 by a Private Midwife, 652 by Manor Hospital, 277 by Bloxwich Maternity

Hospital and 141 occurred outside the Borough.

It will be seen, therefore, that of the 1,993 live and still-births occurring in the Borough, 53 per cent. were delivered by Municipal Midwives, giving an average of 66 for each midwife.

6,512 ante-natal visits were made by Municipal Midwives during 1958.

The Midwives undertake the nursing of mothers discharged from the maternity units before the fourteenth day after their confinements and 864 such mothers were attended. Although this additional nursing throws a considerable volume of work upon the service we always assist the hospitals when patients have to be discharged before the fourteenth day after confinement. We are very glad indeed to have maintained this excellent co-operation with the Walsall Hospital Management Committee's provision; indeed, without this effective co-operation the Midwifery Service of the town would be greatly handicapped.

Two midwives attended an approved Refresher Course held under the auspices of the Royal College of Midwives during the year at Bristol.

### Domiciliary Midwifery Service—1958 (including Nursing Homes)

	Domiciliary Midwives	Midwives in Nursing Homes	Totals
No. of Midwives practising in the Borough at the end of 1958 (ex- cluding Hospitals)—			
(a) Employed by the Council	1 Supervisor 16	—	17
(b) In private practice ..	—	—	—
	17	—	17
No. of cases in the Borough attended by Midwives—	Domiciliary Cases	Cases in Nursing Homes	Totals
(a) Employed by the Council—			
(i) As Midwives .. ..	994	—	994
(ii) As Maternity Nurses	66	—	66
(b) In private practice —			
(i) As Midwives .. ..	1	—	1
(ii) As Maternity Nurses	—	—	—
TOTALS { (i) As Midwives ..	995	—	995
(ii) As Maternity Nurses	66	—	66



## HEALTH VISITING

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During the year the staffing position relating to health visitors has again shown some slight improvement.

During 1958 two of our trainee health visitors obtained their Health Visitors Certificate and were appointed to the department's health visiting staff.

The health visiting staff at the end of the year consisted of 1 superintendent health visitor, 11 health visitors, 1 acting health visitor, 1 tuberculosis visitor, 3 clinic nurses (part-time), and 3 school nurses.

Three student health visitors were receiving tuition under the joint scheme arranged by Walsall and the City of Birmingham Health Departments, and one student health visitor, recently appointed, is awaiting entry into the course, meanwhile being employed in the Health Department.

The nursing staff have again carried out work in connection with the B.C.G. Vaccination Scheme, whereby children who were in the final year at secondary modern schools some years ago were vaccinated and have since been followed up continuously. Close and effective co-operation has existed for many years with the Medical Research Council in this work, and it is expected this co-operation will continue during the coming year.

The liaison between the Diabetic Clinic at the General Hospital and the health visitors has continued during the year, two health visitors being seconded to this collaborative work. The health visitors attend the Diabetic Clinic at the hospital, one each on alternate weeks, and follow up cases in their own homes as required by the consultant physician. Advice and assistance is given in the home to diabetic patients regarding their diet, insulin-therapy, and any other matter in which the patient might need assistance.

The Fathercraft Class held at the end of each adult Mothercraft course has continued. A film is shown and a general discussion follows with questions and answers by the health visiting staff.

As a part of their training, 3rd year student nurses from the local hospitals are given two lectures by the Superintendent Health Visitor concerning the public health aspect of their course. Following upon these lectures the nurses are given practical instruction on the district, a feature which is most enlightening and much appreciated.

Lectures are also given by the Superintendent Health Visitor to student nurses at the Preliminary Training School.



The scheme for visiting the aged by a staff of three part-time State Registered Nurses has been continued throughout the year. The number of aged persons included on our register continues to increase, the sources of our information being the health visitors themselves, the W.V.S., the Gas Board, hospitals, and various other voluntary organisations, together with the general public.

Three nurses visiting the aged, help and advise in any way they can, such as making contact with the appropriate general practitioner where necessary, contact with the "meals on wheels" service of the Women's Voluntary Service and generally advising the old people on the various sources of help which are available. Encouragement is given where appropriate for the old people to join one of the many suitable clubs which are now in existence for aged persons, it being found that the mutual help available from this source is valuable and appreciated. Nursing advice also is given where necessary, and the whole of the organisation of the Health Department, including the Domestic Help Service, is available to help the old persons over their immediate and pressing difficulties. Many old people are very lonely and helpless and they welcome very much this personal contact which the nurses bring and the advice and assistance which they otherwise would not receive.

# Health Visiting and Tuberculosis Visiting during 1958

HEALTH VISITORS											TUBER- CULOSIS VISITORS	
Number of children under 5 years of age visited during year	Expectant Mothers		Children under 1 year of age		Children age 1 and under 2 years		Children age 2 but under 5 years		Tuberculous Households	Other Cases	Total number of families or households visited by Health Visitors	Total visits paid to tuberculous households
	First Visits	Total Visits	First Visits	Total Visits	First Visits	Total Visits	First Visits	Total Visits	Total Visits			
	7,048	1,398	2,033 *182	2,047	12,262 *1,881	6,558 *580	11,663 *1,111	— —	8,930 *1,238	9,142	1,875 *61	

Figures marked with an asterisk are "No access" visits.

## HOME NURSING

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The Home Nursing Service, which is based upon the Leckie Memorial Home, has continued to carry out the work so ably covered for so many years by the voluntary committee of the Victoria Nursing Institution. The Institution and staff were transferred to the Council on the 1st April, 1954. The staff at the end of 1958 consisted of 1 Lady Superintendent, 9 full-time Nurses and 4 part-time Nurses, against an establishment of 20. Difficulty was encountered in recruiting the right type of nurse for these arduous duties, but by means of the considerable use of cars it was possible to cover the requirements of the service.

There is no doubt the home nursing service plays a great part in relieving the demand for hospital beds. Cases are discharged from hospital much earlier at the present time in the full knowledge that a skilled nursing service is available for them in their own homes.

The present day district nurse, in collaboration with the general practitioner, undertakes far more in the nursing of her patients than did the nurse of some years ago, and it follows that the amount of time spent as in-patients in hospital is considerably reduced.

Co-operation with general practitioners and hospitals is satisfactory. For cases requiring nursing at home arrangements are made by the hospital or the general practitioner direct with the lady superintendent of the institution, and the instructions of the medical officers of the hospitals are transmitted to the nurses on the district. Similarly the general practitioner in charge of a case at home gives instructions to the district nurse regarding dressings and treatment, and one can say that there would seem to be little more that can be done to improve the service.

It is again interesting to note that the number of visits paid by district nurses to tuberculous patients decreased by 2,300 as compared with 1957. Whilst this was partly due to the decrease in the number of tuberculous patients, modern treatment now only requires nurses to visit cases two or three times a week instead of daily as in former years.

42,174 visits were paid to 1,094 patients during 1958, 57 per cent. of these being in respect of patients who were 65 years of age and over. No doubt a large proportion of these old people would have been admitted to hospital were it not for the domiciliary attention of the district nurses.

The following table shows the number of cases attended and visits paid during the year by the home nursing staff, together with a classification of types of cases attended:—

# Cases attended and visits paid by Home Nursing Staff during 1958

(1)	Medical (2)	Surgical (3)	Infectious Diseases (4)	Tuber- culosis (5)	Maternal Compli- cations (6)	Others (7)	Totals (8)	Patients included in (2)-(7) who were 65 or over at the time of the first visit during the year (9)	Children included in (2)-(7) who were under 5 at the time of the first visit during the year (10)	Patients included in (2)-(7) who have had more than 24 visits during the year (11)
Cases ...	827	58	—	96	1	112	1,094	632	14	405
Visits ...	32,433	2,707	—	3,703	26	3,305	42,174	27,320	56	38,469



## MINISTRY OF HEALTH CIRCULAR 14/57

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A measure of liason, which is gradually improving, is effected with the hospital Geriatric Unit, which ensures the prompt provision of domiciliary health services to chronic sick and infirm persons discharged from hospital. The Medical Officer of Health is a member of a liaison committee which meets periodically at the General Hospital to discuss any problems which may arise in connection with the care of the chronic sick.

The Home Nursing Service, in spite of staffing difficulties, has been able to meet the demands made in respect of these patients, and the Domestic Help Service, though only slightly expanded in strength, has been able to play its part in providing adequate assistance to cover the increased demand. The Geriatric Nurses employed by the Council have continued to advise old people of the various sources of help available; their social reports on individual cases have proved most valuable when admission to hospital is being sought.

The Ambulance Service is made available to take chronic sick and infirm patients to hospital for periodic treatment and remedial exercises.

During the year an interchange of patients between hospital and old people's homes has been effected in certain cases, thus ensuring the most appropriate use of both types of accommodation.

## VACCINATION AND IMMUNISATION

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Arrangements are in force whereby infants can be vaccinated against Smallpox or immunised against diphtheria, at the Child Welfare Centres or by general practitioners. The doctors attending the centres and the health visitors, both at the centres and during their visits to homes, remind parents continually of the need for this protection. In addition invitation leaflets are sent to parents by the Health Department pointing out the necessity for vaccination and immunisation and this, together with the national publicity campaign on diphtheria immunisation, has its effect upon a good proportion of parents. It can be said that no parent is unaware of the facilities offered, nor do they ignore immunisation in particular through lack of information.

Immunisation against Whooping Cough is available at the Child Welfare Centres,

Facilities for boosting injections of diphtheria prophylactic are available at all child welfare centres and again at school, when immunisation or a boosting dose, as necessary, is offered to every child each year.

## VACCINATION

During the year 847 Primary Vaccinations against Smallpox were carried out, 501 by doctors at the Child Welfare Centres and 346 by General Practitioners.

There were 61 successful re-vaccinations and 55 attempts at vaccination or re-vaccination proved unsuccessful.

The following table shows the ages at vaccination and re-vaccination: —

	Under 1 year	1 year	2—4 years	5—14 years	15 years and over	Total
Vaccinated ...	729	30	23	16	49	847
Re-vaccinated ...	—	—	3	3	55	61

## DIPHTHERIA IMMUNISATION

Arrangements are made at each of our Child Welfare Centres, Day Nurseries and School Clinics for the immunisation of children against Diphtheria. Visits are also paid to the schools for the immunisation of school children and for the administration of re-inforcing doses.

During 1958, 1,094 children under the age of five years and 111 between the ages of five and fifteen were immunised. In addition 36 children were given a re-inforcing dose.

Of the total, 558 were immunised and 32 given a re-inforcing dose by private medical practitioners under the Authority's scheme, the remainder being immunised by the Local Health Authority's own doctors.

## Diphtheria Immunisation

**Table showing number of children immunised each year,  
by age groups**

Year immunised	Under 5	5-14	Total	No. of children given re-inforcing injection	Cases of Diphtheria notified
1958	1094	111	1205	36	—
1957	1037	1294	2331	1158	—
1956	746	1140	1886	774	—
1955	822	988	1810	678	1
1954	856	1027	1883	795	—
1953	858	899	1757	879	—
1952	906	898	1804	1273	—
1951	825	888	1713	1228	2
1950	570	956	1526	1413	2
1949	1171	1167	2338	2111	3
1948	1224	1238	2462	4314	3
1947	1089	725	1814	333	14
1946	957	1104	2061	598	18
1945	1144	1409	2553	* }	34
1944	1136	1610	2746		76
Total	14435	15454	29889	18190	153

\* Prior to 1946, 2,6000 children had received a re-inforcing injection.

\* Prior to 1944, 20,567 children were fully immunised.



### Diphtheria Immunisation in relation to Child Population

Number of children at 31st December, 1958, who had completed a course of Immunisation *at any time before that date* (i.e., at any time since 1st January, 1944)

Age at 31.12.58 ... i.e., Born in year ...	Under 1 1958	1—4 1954—1957	5—9 1949—1953	10—14 1944—1948	Under 15 Total
Last course of injections (whether primary or booster)					
A. 1954—1958 ...	130	2,979	6,558	2,446	12,113
B. 1953 or earlier	—	—	903	7,970	8,873
C. Estimated mid- year child popula- tion ... ..	2,050	7,550	19,300		28,900
Immunity Index 100 A/C.	6.3	39.4	46.7		41.9

### VACCINATION AGAINST POLIOMYELITIS

During the year, with the introduction into this country of Salk Vaccine, we were able to vaccinate many more persons against poliomyelitis.

The Poliomyelitis Vaccination Scheme was further extended in September, 1958 to take in persons born between 1933 and 1942 and we were also permitted to commence reinforcing doses to be given not less than seven months after the second injection.

The following table shows the number of vaccinations carried out during 1958:—

Group	Injections given during 1958			Awaiting vaccination at 31st Dec., 1958
	One Injection only	Two Injections	Third Injections	
Children born 1943-58 ...	2,394	11,090	5,318	1,975
Young persons born 1933-42	1	7	—	5
Expectant mothers ...	42	234	—	58
General Practitioners and Families ... ..	—	56	—	—
Ambulance Staffs and Families ... ..	—	41	—	—
Hospital Staffs, Medical Students and their Families ... ..	—	133	—	—
Totals ...	2,437	11,561	5,318	2,038



Mainly, vaccinations have been carried out at special vaccinating sessions at our school clinics, but with the inclusion of the older groups of children, immunisation is now being carried out in large numbers in the schools, and this arrangement is working very well. Our thanks are due for the excellent co-operation which we have received from all concerned, especially the head teachers of the schools and members of the school health staff.

## AMBULANCE SERVICE

There has been a further increase in the number of cases carried by ambulance during the year, 34,034 patients being conveyed as against 31,022 in 1957. The mileage run during the year has increased to 148,586, as against 142,353 in 1957. The following summary shews the work done during the year:—

Calls	...	...	...	30,900
Journeys	...	...	...	12,039
Cases	...	...	...	34,034
Mileage	...	...	...	148,586

The fleet at the end of 1958 consisted of 7 ambulances and 6 sitting case vehicles. During the year one ambulance was seconded for Civil Defence driving instruction and 2 ambulances were disposed of and the new ambulance with diesel engine was delivered in January, 1958. A similar vehicle was ordered for delivery in 1959 and at the time of writing is in operational use.

Radio telephony is now used in most vehicles and although we were not able to see the full effect of its economies in 1958, its advantages in making vehicles immediately available are invaluable particularly in emergencies.

The ambulance staff at the end of the year consisted of 1 Ambulance Supervisor, 1 Assistant Supervisor, and 24 Ambulance Drivers, 3 of whom are women. All members of the staff have successfully passed the St. John examination and refresher courses are arranged as necessary. Arrangements are in hand for the newcomers to attend the first available course of lectures for the St. John Certificate.

The Ambulance staff are also now responsible for the conveyance of bodies to the mortuary at the request of the Borough Coroner. Although this work is not normally that of an ambulance service, the Health Committee and the staff were glad to co-operate in view of the difficulty experienced in obtaining offers from undertakers to carry out the work.

# AMBULANCE SERVICE

The following table shows the work carried out during the year: —

Month	CALLS	JOURNEYS										CASES						MILEAGE			
		Illness		Emergency		Other		Abortive and Service		Midwives, Home Nurses, Analgesia Apparatus etc.		Illness			Emergency			Other		AMB.	S.C.A.
		AMB.	S.C.A.	AMB.	S.C.A.	AMB.	S.C.A.	AMB.	S.C.A.	AMB.	S.C.A.	AMBULANCE		S.C.A.	AMBULANCE		S.C.A.	AMBULANCE			
												Stretcher Cases	Sitting Cases		Stretcher Cases	Sitting Cases		Stretcher Cases	Sitting Cases		
Jan.	2621	265	693	59	—	78	—	21	7	23	8	749	870	1206	57	5	78	—	5349	7746	
Feb.	1997	216	553	56	—	69	—	22	11	14	23	708	486	1271	55	4	69	—	3515	7142	
March	2263	240	286	52	—	87	—	21	10	7	36	715	370	1584	52	—	87	—	5958	6961	
April	2220	276	372	69	—	72	—	24	8	20	31	662	692	1172	70	—	72	—	5324	6633	
May	2597	429	433	56	—	63	20	30	6	11	36	697	524	1580	56	—	63	—	5884	6894	
June	2034	135	454	87	—	120	—	40	17	14	59	487	340	1737	92	—	120	—	5224	7490	
July	2869	189	468	102	—	132	—	45	11	20	58	445	320	1831	105	2	132	—	5366	7838	
Aug.	2549	170	442	110	—	124	—	26	14	19	70	224	400	1608	117	—	124	—	5121	6241	
Sept.	2497	275	446	133	—	123	—	48	3	47	38	427	560	1766	137	—	123	—	5818	6606	
Oct.	3215	287	393	134	—	125	—	46	2	9	81	543	436	2000	133	9	125	—	6439	7466	
Nov.	3067	259	532	120	—	115	—	26	22	43	33	492	630	1367	120	—	115	—	4881	6721	
Dec.	2971	209	387	114	—	110	22	20	16	26	56	507	700	1532	121	—	110	—	5348	6621	
							40	220	127	253	529	6656	6329	18654	1115	20	1218	—	64227	84359	

## PREVENTION OF ILLNESS, CARE AND AFTER-CARE

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### Sick-room Appliances Service

As part of our care and after-care services the Council initiated a scheme for sick-room appliances to be made available, upon a certificate of a hospital, family doctor, district nurse or health visitor. Sick-room appliances are issued on loan, free of cost, and the service has proved to be most beneficial.

The appliances are housed at the Ambulance Station, the Ambulance Supervisor being responsible for the issue and return of all articles and for the care and maintenance of all mechanical appliances. The Ambulance Station is a very suitable place for the issue of such articles, as a twenty-four hour service is ensured.

During the year the following issues were made:—

Rubber Sheets ...	178	Urinals ...	108
Back Rests ...	220	Sputum Cups ...	6
Feeding Cups ...	8	Air Rings ...	134
Crutches ...	8 prs.	Wheel Chairs ...	66
Walking Sticks ...	24	Air Beds ...	2
Bed Cradles ...	42	Bedpans ...	284
Bed Tables ...	3	Spinal Carriages ...	1
Commodes ...	13	Bed Boards ...	1 set

A small deposit is required for each article lent, and this is refunded when the article is returned to the depot. In those cases where the patient is unable to arrange for the collection of the article, every endeavour is made to see that the delivery is made by the department's transport facilities.

The Sick-Room Appliances Service is one of our most appreciated services. The availability, without charge, of the necessary articles for the sick room helps to alleviate the demand on hospital beds by making conditions more acceptable in the nursing of the patient at home. The service has been extended in each year of its operation and, from the large number of expressions of gratitude we receive from patients, we are assured of the genuine need of the service.

### MILK ASSISTANCE SCHEME

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The Health Committee, implementing their proposals for the care and after-care of tuberculous patients, instituted a scheme, in conjunction with the Tuberculosis After-Care Committee, for the supply of milk to tuberculous patients. Broadly the scheme provides



for the free issue of one pint of milk per day where the total weekly income does not exceed an amount specified in the Council's scale. The scale was modelled upon that prepared by the Association of Municipal Corporations and the arrangements so far appear to be reasonably adequate.

During the year 11 patients, for varying periods, have been supplied with one pint of milk per day, free of charge. The total amount of milk supplied during the year was 355 gallons.

A grant of free milk is issued by the department upon the certificate of the Chest Physician. Close liaison is maintained between the Chest Physician who, of course, is now an officer of the Regional Hospital Board, and this department. The officers of the Chest Clinic and of this department confer regularly upon the needs of tuberculous patients. The Tuberculosis Health Visitor has an office at the Chest Clinic and works with the Chest Physician. Contact is thereby maintained between the tuberculous patient and other activities of the Health Department.

Milk is supplied through the patient's own Registered Milk Retailer so that the patient is not put to any trouble to obtain milk from a special source, a benefit appreciated by the patients.

## **TUBERCULOSIS AFTER-CARE**

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The Tuberculosis After-Care Committee is responsible, on behalf of the Council, for after-care for tuberculous patients. Extra assistance for the tuberculous patient in the form of additional food, change of air, clothing, better home conditions, extra beds and bedding, and more suitable occupation are the Committee's main activities. The Committee has functioned for many years and has been of great help to a large number of patients. Mainly the funds are derived from voluntary sources, but the Council also makes a monetary grant to assist the Committee in its work.

The Committee makes arrangements for practical help to patients where necessary and a very considerable sum is distributed as Christmas gifts to all patients on the books. The Committee is well served by its honorary officers who have a long tradition of service behind them. There is a helpful liaison between the voluntary body and the Health Department and this ensures active co-operation at all times.

## **CONVALESCENT TREATMENT**

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Section 28 of the National Health Service Act, 1946, provides for the prevention of illness, care and after-care. Under these provisions the local authority may make arrangements to provide convalescent



treatment for persons certified to require such treatment either by hospitals or by their medical practitioner. The convalescent treatment so provided shall not be given to persons needing medical care.

During the year 21 children received convalescent treatment for three weeks at the Ormerod Convalescent Home, St. Annes-on-Sea, and 7 adults (5 for two weeks, 1 for 3 weeks and 1 for 4 weeks) at convalescent homes at Bournemouth, Broadstairs, Clevedon, Exmouth and Southport.

The children's part of the scheme is run on similar lines to that operated by the Walsall Poor Children's Country Holiday Society and co-ordination of the two schemes is well established.

## DOMESTIC HELP SERVICE

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The demand for domestic help continues to exceed the amount of help available, despite a slight improvement in the staffing position. As will be noted from the statistics supplied, out of 425 cases in which help was provided 275 (65 per cent.) were chronic sick, including aged and infirm. Our policy of providing a reduced number of hours to a larger number of cases has worked well and the help provided has been found to be sufficient to meet the small but necessary needs of the aged persons. The service given is generally much appreciated by the old folk, and, apart from the help given, the weekly visits by the Home Help alleviate their feeling of loneliness.

The following are the statistics for the Domestic Help Service during the year:—

No. of Helps employed at 31st December, 1958 ...	56
(28 Full-time, 28 Part-time)	
Ns. of confinement cases at which help was supplied	111
No. of tuberculosis cases at which help was supplied	6
No. of chronic sick (including aged and infirm)	
cases at which help was supplied ... ..	275
No. of other cases at which help was supplied ...	33
Total hours worked at confinement cases ... ..	7,887
Total hours worked at tuberculosis cases ... ..	2,272
Total hours worked at other cases ... ..	77,204

## BLIND PERSONS

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The care of blind persons is a function of the Welfare Committee in Walsall, and they work in close conjunction with the Walsall, Wednesbury and District Society for the Blind. There is a modern institution and workshops for the blind in the town and the facilities and care provided are of the best.

At the end of 1958 there were 276 Walsall residents on the register for the blind and 32 on the register for the partially sighted.

### Ophthalmia Neonatorum

(i) Total number of cases notified during the year ... ..	5
(ii) Number of cases in which:—	
(a) Vision lost ... ..	—
(b) Vision impaired ... ..	—
(c) Treatment continuing at end of year ... ..	—

## TUBERCULOSIS

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The following report has been supplied by Dr. J. N. Macartney, a Chest Physician of the Birmingham Regional Hospital Board, who is in charge of the Walsall Chest Clinic which deals with cases of tuberculosis. Dr. Macartney is also responsible to the Walsall Council in all matters relating to environmental conditions of tuberculosis cases in the Borough. The report deals with this aspect of his work only.

“ The campaign against tuberculosis has achieved, as the following figures show, further reduction in the number of deaths and of new cases: —

WALSALL.		1957	1958
Respiratory tuberculosis ... ..		0.139	0.104
Other forms of tuberculosis ... ..		0.017	0.018
ENGLAND AND WALES.			
Respiratory tuberculosis ... ..		0.095	0.089
Other forms of tuberculosis ... ..		0.012	0.011
NOTIFICATIONS.			
Respiratory ... ..		92	
Other forms of tuberculosis ... ..		11	

A noteworthy feature is that only one person under the age of 45 years died of respiratory tuberculosis.

A dramatic elimination of tuberculosis is highly improbable however, and for many years the detection and treatment will provide a formidable task, especially amongst the older age-group of men.

The annual epidemics of influenza and broncho-pneumonia continue to be of particular danger to ex-tuberculous patients whose lungs have been severely damaged by tuberculosis in the past and whose respiratory reserve is poor. The answer to this particular problem lies partly in the early diagnosis of tuberculosis so that the lung damage is minimal.

The grossly polluted atmosphere breathed by Walsall people is a tremendous handicap to their health especially where chest diseases are concerned. A yearly average for the town of approximately 200 tons of atmospheric deposit per square mile should not be tolerated. Nowadays, clean drinking water is regarded as our birth right; similar emphasis should be placed upon the air we breathe.

During 1957, there was an extremely high admission rate for coloured workers suffering from tuberculosis but the figure for 1958 shows a drop from 14 per cent. to 8 per cent. which is encouraging.

B.C.G. protective vaccination is offered to young contacts, and during the year under review, 189 persons were vaccinated.

The Local Authority's enlightened rehousing programme continues to be a major factor in the fight against tuberculosis."

## MENTAL HEALTH

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The administration of the Mental Health Service is carried out by the Health Committee, a special sub-committee having been formed to deal with cases of mental defectiveness, the Health Committee itself being responsible for the supervision of a mental illness service.

The following is a list of the staff employed in this service:—

GENERAL SUPERVISION	- - -	Medical Officer of Health.
APPROVED MEDICAL OFFICER	- -	Deputy Medical Officer of Health.
HANDICAPPED PUPILS AND SCHOOL HEALTH SERVICE REGULATIONS, 1945		
DULY AUTHORISED OFFICER	- -	1 male. 1 part-time deputy.
MENTAL WELFARE OFFICERS	- -	1 female. 1 assistant.
SUPERVISOR, OCCUPATION CENTRE	-	1 female. 2 assistants.



There is close co-operation with the Birmingham Regional Hospital Board and the Hospital Management Committee of St. Margaret's Hospital, and Mental Deficiency Hospital, and the advice and assistance of the officers of the Board and the Committee are freely available.

The Senior Mental Welfare Officer and her assistant undertake the ascertainment of mental defectives and their supervision when placed under Statutory Supervision. In addition, arrangements have been made with the St. Margaret's Hospital Management Committee for the supervision of Walsall patients placed on licence in Walsall or in the vicinity. The periodic reports on certified patients required by the Visiting Justices are also prepared, after visitation, by these Officers.

Both Mental Welfare Officers are Petitioning Officers for the purpose of certification under the Mental Deficiency Acts.

The Senior Mental Welfare Officer has spoken at a number of meetings during the year of the work of a Mental Welfare Officer, thus giving the general public a more informed mind on the problems of mental deficiency.

The after-care of patients discharged from mental hospitals is carried out by the health visiting staff, a number of health visitors having attended a special course on such care.

The Walsall Mental Welfare Voluntary Association undertakes the supervision of a large number of voluntary patients who do not come within the purview of the statutory committee. The Mental Welfare Officer is the Secretary of the Association so that effective co-ordination in this matter is obtained.

### Mental Illness

The number of cases suffering from mental illness, seeking voluntary admission to mental hospitals, has been maintained during the present year.

The following table shews the number of cases dealt with in 1958 under the Lunacy and Mental Treatment Acts, or otherwise, by the Duly Authorised Officers:—

No. of Health Service certified patients removed to St. Matthew's Hospital, Burntwood	...	...	...	50
No. of Health Service voluntary patients admitted to St. Matthew's Hospital, Burntwood	...	...	...	253
No. of Health Service cases, alleged to be of unsound mind, investigated	...	...	...	35
No. of patients referred for after-care	...	...	...	171
No. of after-care visits paid	...	...	...	718
No. of miscellaneous visits made by the Duly Authorised Officers	...	...	...	352

The system whereby after-care visiting of patients discharged from mental hospitals is carried out by the health visiting staff has continued to work very satisfactorily. These patients often, after a long stay in a mental hospital, are faced with the difficult task of readjusting themselves to life in the community. The Health Visitor, with careful handling and tact, can assist greatly in helping the patient to regain confidence and, although progress may be slow, the time spent is considered well worth while, even if success is not always achieved. A considerable amount of time is also spent by the Health Visitors and sometimes by the Duly Authorised Officers, in persuading patients to return to hospital for further treatment.

### **Mental Deficiency**

The work of ascertaining mental defectives under the Mental Deficiency Acts is very complete in Walsall. The Head Teachers of schools are responsible for reporting to the Principal School Medical Officer any child whom they feel is retarded. The Principal School Medical Officer then arranges for mental examination at the earliest possible date. As stated above these children are then cared for either by admittance to a mental deficiency hospital, or an occupation centre. A large number of cases is placed under voluntary supervision, and those placed under guardianship are under the supervision of the Guardianship Officer, who is also the Assistant Mental Welfare Officer.

A system of temporary care in hospitals, without certification, has operated successfully for a number of years, thus enabling the relatives of patients who live at home to have some respite.

### **Patients on Licence, etc.**

The Council has an arrangement with Mental hospitals within the region, for the Council's Mental Welfare Officers to be responsible for reports on home conditions for leave of absence and for the supervision of patients on licence from hospital. These Officers also report on the home conditions of patients expected to be allowed on licence for trial and for discharge from Order. In addition, reports are made to the Visitors for the County of Stafford, and periodic reports on patients on licence to the Medical Superintendent at St. Margaret's Hospital and other hospitals.

The Mental Welfare Officers continue to find employment for patients who are considered suitable for licence and for their supervision afterwards.

### **Mental Welfare Association**

The Senior Mental Welfare Officer is Secretary of the Mental Welfare Association and this officer and the Assistant Mental Welfare Officer are responsible for the work undertaken by the Association.



There is a large number of voluntary patients on the register and the Association carries out useful work in supervising cases which do not come within the purview of the Statutory Committee.

### **Occupation Centre**

An Occupation Centre is provided by the Council and is conducted in church school premises rented for the purpose. The centre is for those children who cannot be educated within the normal educational system, the emphasis being on training.

The Junior children attend the occupation centre daily from 9.30 a.m. to 3.15 p.m., the Senior Girls' Class meets on Tuesdays and Thursdays from 2 p.m. to 4 p.m. and the Senior Boys' Class meets Mondays and Wednesdays from 2 p.m. to 4 p.m. The Senior Girls and Boys have 1s. a week pocket money, provided their attendance at classes is good.

Rug making, stool seating, embroidery, elementary handicraft, percussion band, eurythmics, country dancing, puppetry, games and speech training form part of the curriculum of this flourishing centre. A number of small children were admitted during the year and the kindergarten group is still growing in size.

On the 31st December there were 32 junior and 27 senior defectives in attendance.

Plans are now well in hand for the erection of a new Occupation Centre to cater for 100 persons, which we anticipate will be ready in 1960 or 1961. This centre will provide for the training of juniors and adults as recommended in the new Mental Health legislation.

### **General**

More than usual attention has been paid to mental illness and defectiveness in Walsall for very many years. Walsall originally provided a colony for mental defectives, a residential special school for educationally subnormal pupils and an occupation centre. The work of the ascertainment of mental defectives is as effective as possible and co-operation between the various committees of the Council concerned with children is very complete.

An increasing number of patients is being discharged from Order under the Mental Deficiency Acts by the Board of Control. The results of this new policy are awaited with some anxiety. It remains to be seen how these patients, many of whom have been sheltered in Hospital for many years, will fare when faced with the stresses of everyday life.

Some of the nurses taking the course for health visitors in Birmingham have received instruction from the staff of the Mental Welfare Department and Occupation Centre during the year, and this practical instruction is, we are sure, of benefit to them as a part of their curriculum.

The following tables show in detail persons dealt with under the Mental Deficiency Acts:—



1. Particulars of cases reported during 1958

	Under age 16		Age 16 and over	
	M.	F.	M.	F.
(a) Cases ascertained to be defectives "subject to be dealt with." Action taken on reports by—				
(1) Local Education Authorities on children				
(i) While at school or liable to attend school	3	5	—	—
(ii) On leaving special schools	2	2	8	—
(iii) On leaving ordinary schools	4	5	—	—
(2) Police or by Courts	—	—	1	1
(3) Other sources	2	2	1	2
Total of 1 (a)	11	14	10	3
(b) Cases reported who were found to be defectives, but were not regarded as "subject to be dealt with" on any ground	—	—	1	—
(c) Cases reported who were not regarded as defectives and thus excluded from (a) or (b)	—	—	—	—
(d) Cases reported in which action was incomplete at 31st December, 1958, and thus excluded from (a) or (b)	—	—	—	—
Total of 1 (a) — (d)	11	14	11	3

## 2. Disposal of cases reported during 1958

	Under age 16		Aged 16 and over	
	M.	F.	M.	F.
(a) Of the cases ascertained to be defectives "subject to be dealt with" number				
(i) Placed under Statutory Supervision ...	9	12	9	1
(ii) Placed under Guardianship ...	—	—	—	—
(iii) Taken to "Places of Safety" ...	—	—	—	—
(iv) Admitted to Hospitals ...	2	2	1	1
Total of 2 (a) ...	11	14	10	2
(b) Of the cases not ascertained to be defectives "subject to be dealt with" number				
(i) Placed under Voluntary Supervision ...	—	—	—	—
(ii) Action unnecessary ...	—	—	1	—
Total of 2 (b) ...	—	—	1	—
(c) Cases reported at 1 (a) or (b) who removed from the area or died before disposal was arranged ...	—	—	—	1
Total of 2 (a) — (c) ...	11	14	11	3

**3. Number of Mental Defectives for whom care was arranged by the Local Health Authority under Circular 5/52 during 1958**

Admitted to:—

(a) National Health Service hospitals ... ..  
 (b) Elsewhere ... ..  
 Total ...

Under age 16		Aged 16 or over	
M.	F.	M.	F.
3	1	1	4
3	—	—	—
6	1	1	4

**4. Total cases on Authority's Registers at 31.12.58**

(i) Under Statutory Supervision ... ..  
 (ii) Under Guardianship ... ..  
 (iii) In "Places of Safety" ... ..  
 (iv) In Hospitals ... ..  
 Total 4 (i — iv) ...  
 (v) Under Voluntary Supervision ... ..  
 Total 4 (i — v) ...

31	28	97	109
—	—	1	2
—	—	—	—
18	13	125	147
49	41	223	258
—	—	283	203
49	41	506	461

**5. Number of defectives under Guardianship on 31.12.58, who were dealt with under the provisions of Sec. 8 or 9, Mental Deficiency Act, 1913 (included in 4 (ii) )**

—	—	—	—
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6. Classification of defectives in the Community on 31.12.58 (according to need at that date)		Under age 16		Aged 16 and over	
		M.	F.	M.	F.
(a) Cases included in 4 (i)–(iii) in need of hospital care and reported accordingly to the hospital authority:—					
(1) In urgent need of hospital care:—					
(i) "Cot and chair" cases ...	...	—	1	—	—
(ii) Ambulant low grade cases ...	...	2	—	1	—
(iii) Medium grade cases ...	...	—	—	1	1
(iv) High grade cases ...	...	—	—	—	—
Total urgent cases ...	...	2	1	2	1
(2) Not in urgent need of hospital care:—					
(i) "Cot and chair" cases ...	...	—	—	—	—
(ii) Ambulant low grade cases ...	...	1	—	—	2
(iii) Medium grade cases ...	...	—	—	—	—
(iv) High grade cases ...	...	—	—	—	—
Total non-urgent cases ...	...	1	—	—	2
Total ...	...	3	1	2	3

## 6. (continued)

	Under age 16		Aged 16 and over	
	M.	F.	M.	F.
(b) Of the cases included in items 4 (i), (ii) and (v), number considered suitable for:—				
(i) Occupation centre	19	10	5	5
(ii) Industrial centre	—	1	12	17
(iii) Home training	—	—	—	—
Total	19	11	17	22
(c) Of the cases included in item 6 (b) number receiving training on 31.12.58:—				
(i) In occupation centre	17	7	5	5
(ii) In industrial centre	—	1	10	17
(iii) From a home teacher—in groups	—	—	—	—
(iv) From a home teacher at home (not in groups)	—	—	—	—
Total	17	8	15	22

COUNTY BOROUGH OF WALSALL

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**ANNUAL REPORT**

OF THE

**Chief Public Health Inspector**

ON THE

**Work of the Public Health Inspectors**

for the year ended 31st December, 1958

TO THE MAYOR, ALDERMEN AND COUNCILLORS OF THE COUNTY  
BOROUGH OF WALSALL.

Mr. Mayor, Ladies and Gentlemen,

I submit my annual report for 1958 on the work of the Public Health Inspectors in the Borough.

This is the fourth year in succession that I have to report on continuing staff shortages and extreme pressure of duties. These circumstances exercise a continuing strain on the remaining members of the staff in attempting to carry out the responsibilities placed on the department.

Although the report has again been prepared in an abridged form it does however contain sufficient information to indicate the amount and scope of the work undertaken by the Public Health Inspectors. The main concentration of duties during the year has been on housing work, meat and foods inspection and atmospheric pollution and it is again regretted that more time has not been able to be given to the important duties of the department in connection with food hygiene.

I again pay tribute to the continued support and co-operation of the Chairman and Members of the Health Committee and Medical Officer of Health and my thanks are also due to chief officers and heads of departments for their help and co-operation.



To the members of my staff I tender sincere thanks. In particular I would like to place on record my appreciation of the work of my deputy Mr. E. Bayley during my prolonged absence in the early part of the year owing to illness. I also thank him and the Specialist Inspectors Messrs. Woodward, Kelley, Penn and Monks for helping in the preparation of this report.

Yours obediently,

C. A. STANSBURY,

Chief Public Health Inspector.

## **PART 1—STAFF**

There have been several changes in the staff of this section of the department during the past year.

Mr. Norman Auliff, Senior Clerk retired on the 2nd September, 1958 after 37 years service in the department; he has been succeeded by Mr. W. F. Buttery. Two Pupil Public Health Inspectors were successful in obtaining the qualifying examination of the Public Health Inspectors' Education Board and two District Inspectors were successful in obtaining the Meat and Other Foods Inspectors' Certificate of the Royal Society of Health. Two Pupil Public Health Inspectors were appointed, one on a probationary basis.

Mr. E. M. Thomas, District Public Health Inspector, who had been with the department for 10 years, retired on age grounds on 30th July, 1958.

## **PART 2—HOUSING**

In this section of the report reference is made to work carried out under the Public Health Acts, Housing Acts and Walsall Corporation Acts in connection with the repair, improvement and demolition or closure of houses.

### **Repairs to Houses**

During the year under review the department dealt with approximately 1,500 complaints about the unsatisfactory condition of dwellinghouses. This number is rather less than that dealt with last year when action was taken in connection with 2,203 houses. So far as works of repair are concerned these have mainly been of a basic character designed to alleviate conditions prejudicial to health rather than to raise the standard of houses by comprehensive repair or reconditioning. Approximately 1,570 houses have been subjected to some repair work or other as a result of notices served or action taken by the department. The works carried out have in the main consisted of general property repairs and of repairs to drains and W.C.'s. In some cases the repairs were carried out by the owners in compliance with notices served upon them but in a proportion of cases the owners

defaulted and the work was carried out by this department and the cost recovered from the owners.

The Walsall Corporation Act, 1954 gives the department summary powers to enforce urgent repairs to dwellinghouses and good use was made of these powers during the year. The Act empowers the department, if notices are not complied with within a relatively short period, to do the work in default of the owners without resorting to court action and to recover from them the cost of so doing. The work carried out under the Corporation Act is summarised below:—

	No. of Notices Served	Work done by Owners	Work done in Default
Section 44 (power to remedy stopped up drains, etc.) ...	50	25	25
Section 50 (repair of defective houses) ... ..	175	126	35

### Rent Act Procedure

The Rent Act, 1957 has been in operation for about 18 months and its complicated procedure is now becoming better understood. An analysis of the activity under the Rent Act is set out below:—

#### Part I—Applications for Certificates of Disrepair.

1. Number of applications for certificates ... ..	121
2. Number of decisions not to issue certificates ... ..	Nil
3. Number of decisions to issue certificates—	
(a) in respect of some but not all defects ... ..	80
(b) in respect of all defects ... ..	98
4. Number of undertakings given by landlords under paragraph 5 of the First Schedule ... ..	88
5. Number of undertakings refused by Local Authority under proviso to paragraph 5 of the First Schedule ...	Nil
6. Number of Certificates issued ... ..	92

#### Part II—Applications for Cancellation of Certificates.

7. Applications by landlords to Local Authority for cancel- lation of certificates ... ..	31
8. Objections by tenants to cancellation of certificates ...	11
9. Decisions by Local Authority to cancel in spite of tenant's objection ... ..	Nil
10. Certificates cancelled by Local Authority ... ..	17



Quite apart from the variety of forms referred to in this analysis, the Act has added considerably to the work of the department and of the Town Clerk's Department in view of the time which has to be given to advising tenants and landlords about their rights and responsibilities under the Act.

The discrepancy between the number of applications received for certificates of disrepair and the number of certificates issued is due to the fact that a considerable time often elapses between the date of application and the date of decision to issue a certificate. It should be realised that a certificate is not necessarily issued in respect of every application.

### Slum Clearance

No new clearance areas were reported to the Council during the year under review. On the other hand efforts were concentrated on the inspection of property in several areas of the town and it is intended to represent those houses in 1959. Demolition or closing orders were however made in respect of 75 individually unfit houses. In addition certificates of unfitness were issued in respect of 36 Council owned properties from which it had been decided to rehouse the tenants prior to demolition; these certificates were issued in order that the Council might properly claim subsidy for rehousing families from unfit houses owned by the Council.

During the year 352 houses were closed and 301 houses were demolished. The total number of families rehoused from unfit properties was 374; the number of persons involved in this rehousing was 1,259. At 31st December, 1958 there were 114 condemned and unfit houses still occupied.

The summary below sets out in detail the progress made during the year in the clearance of unfit properties.

Condemned houses still in occupation at 1st January, 1958	348
Houses for which demolition or closing orders were made or undertakings not to use accepted ... ..	75
Certificates of unfitness issued by Medical Officer of Health	36
Houses included in confirmed Clearance Areas and Compul- sory Purchase Orders ... ..	Nil
Families rehoused by agreement prior to confirmation of orders, etc. ... ..	10
Condemned houses vacated ... ..	352
Houses void at time of representation ... ..	3
Condemned houses demolished ... ..	301
Condemned houses still occupied at 31st December, 1958 ...	114



Slum clearance really began in 1930 under the Housing Act, 1930. This Act was replaced at intervals by other Housing Acts, the latest being the Housing Act, 1957 which is still in force. The summary set out below represents progress made in Walsall since slum clearance began in 1930:—

Houses represented as unfit	...	...	...	...	4,603
Houses demolished or closed	...	...	...	...	4,040
Approximate number of persons displaced	...	...	...	...	16,810

During 1958 new houses in Walsall were provided by the following undertakers:—

(a) Walsall Corporation	...	...	...	...	524
(b) Private persons—					
(i) Permanent houses	...	...	...	...	218
(ii) New dwellings created by conversion of existing properties	...	...	...	...	8

### Improvement Grants

Enquiries from owners and owner-occupiers of older types of property about grants for improvements of their houses continued steadily through the year. Of these 125 resulted in firm applications for grants and 120 of these applications were approved by the Health Committee, the total cost of the approved grants amounting to £17,821 4s. 6d. Of these 120 applications approved 110 were from owner-occupiers and only 10 from owners of tenanted property. It is worth emphasising that the grants are available both to owner-occupiers and to landlords of tenanted property and that in approved cases landlords are entitled to a rent increase in respect of improvements carried out under the scheme.

### Tents, Vans, Sheds and similar structures

A considerable amount of the inspectors' time was taken up in dealing with the unauthorised parking of caravans and tents on various sites within the Borough. Under powers contained in Section 106 of the Walsall Corporation Act, 1930, the procedure has been to serve informal notices on the occupiers of these structures, and to prosecute the occupiers if the vans or tents are not removed within a reasonable time. Because of the practice of many van dwellers to return to sites from which they have been evicted, all known parking sites are kept under observation.

These measures have to a large extent been effective in controlling the caravan problem although they have not of course solved it. There is no doubt that the development of vacant sites for other purposes will prove to be the most effective method of dealing with the problem.

### PART 3—FOOD

Food administration forms an important part of the Public Health Inspector's duties and for convenience of reference, this aspect of the work is reported on under the following headings:—

- (a) Slaughtering facilities;
- (b) Inspection of Meat;
- (c) Diseases of Animals Act administration;
- (d) Unwholesome food condemned;
- (e) Foods of unsatisfactory quality;
- (f) Milk;
- (g) Ice Cream;
- (h) Food Hygiene;
- (i) Sampling—Food and Drugs Acts, 1955.

#### (a) SLAUGHTERING FACILITIES

Slaughtering of animals for sale for food in Walsall is concentrated in two private slaughterhouses on opposite sides of Shortacre Street.

#### (b) INSPECTION OF MEAT

##### General Review

During the year under review the carcasses and offals of 77,940 animals were inspected, compared with 85,658 during 1957. There has therefore been a decrease of about 7 per cent. in the total number of animals slaughtered and inspected. The number of pigs killed is about the same as for 1957 and the decrease referred to is distributed more or less evenly between cattle, cows, calves and sheep. These figures are given in more detail at the commencement of Table 3 on page 60.

Meat inspection at the slaughterhouse was carried out on a full time basis by Mr. A. D. Kelley, Mr. J. W. Fairless and Mr. D. C. Hough and also during the latter part of the year by Mr. F. Coldrick. During holiday periods and periods of absence from sickness other qualified meat inspectors on the staff have assisted in meat inspection work. It is the practice in Walsall, in spite of staff difficulties, to inspect all animals at the time of slaughter. This enables the department to maintain a high standard of meat inspection and so provide an adequate public health safeguard.

The total weight of diseased meat and offal condemned during 1958 was approximately 117 tons and Tables 2 and 3 on pages 59 and 60 refer in some detail to the main types of diseases encountered in animals on post mortem examination. Because of pressure of work it has not however been possible to prepare a detailed analysis of all the diseased conditions met with.



### **Meat condemned because of bruising**

The amount of meat condemned during the year because of bruising was 7,592 lbs. compared with 10,971 lbs. in 1957 and 14,637 lbs. in 1956.

### **Congenital Tuberculosis in Calves**

Only two cases of congenital tuberculosis in calves were recorded this year compared with 15 in the previous year. Details of the farm from which these animals came have been forwarded to the Animal Health Division of the Ministry of Agriculture, Fisheries and Food.

### **Cysticercosis**

This is a parasitic condition of certain food animals which may cause tapeworm infestation in human beings. This condition is found mainly in cattle but on rare occasions a related form of the parasite is found in pigs and sheep. During 1958 cysticercosis in Walsall was found in the organs or carcase meat of 185 cattle, 38 sheep and one pig. Last year the condition was found in 169 cattle, but not in any sheep or pigs.

All meat and offals found to be affected with the parasite were condemned. The remaining apparently healthy offals and carcasses were refrigerated for 14 days in order to render them safe for human consumption. An analysis of cysticercosis is given in Table 1 on page 59.

### **Swine Fever**

This diseases is notifiable under the Diseases of Animals Act, 1950. Although it is not commonly encountered in the Slaughterhouse, the examination of a large number of pigs which have been in contact with cases of swine fever adds considerably to the work of meat inspection. During the past year 1,773 pigs which had been in contact with known cases of swine fever were received at the slaughterhouse for immediate slaughter. On post-mortem examination 16 of the pigs were found to be infected with swine fever while a further 14 pigs showed signs of fever which it was not possible to identify with certainty; all 30 carcasses were incinerated under supervision in accordance with the requirements of the Diseases of Animals Act.



**TABLE 1****Cysticercosis in Cattle, Sheep and Pigs**

Animals	Masseter muscle of head	Tongue	Heart	Skirt	Carcase muscle	
					Localised	Generalised
Bullocks ...	53	7	45	3	—	3
Heifers ...	35	1	26	5	—	1
Cows ...	5	—	3	2	—	—
Bulls ...	—	—	—	—	—	—
Totals for cattle	93	8	74	10	—	4
Sheep ...	—	—	38	—	—	—
Pigs ...	1	1	1	1	—	1

**Bovine Tuberculosis**

There has been a steady reduction in the incidence of this disease during the last 10 years. In 1948 30 per cent. of all bovine animals examined on post mortem at the slaughterhouse were found to be infected to some extent with tuberculosis. During 1958 the figure had fallen to approximately 6 per cent. There is little doubt that the Tuberculosis Area Eradication Plan which the Ministry of Agriculture, Fisheries and Food have been carrying out in various parts of the country is having its effect on the incidence of this disease in cattle. It is hoped to refer more fully to this subject in next year's annual report.

**Diseased Meat and Offals**

During the year the following quantities of meat and offals were found to be diseased, unsound and unfit for human consumption:—

**TABLE 2**

All Diseases except Tuberculosis:—					T.	C.	Q.	Lbs.
Carcase meat	...	...	...	...	36	18	3	17
Offals	...	...	...	...	56	6	2	12
Tuberculosis only:—								
Carcase meat	...	...	...	...	9	14	3	0
Offals	...	...	...	...	14	4	3	27
					117	5	1	0

## Meat and Food Inspection Statistics

The following table sets out the number of carcasses inspected, together with particulars of the carcasses or parts thereof condemned, and is in the form required by the Ministry of Agriculture, Fisheries and Food.

### TABLE 3

1958

	Cattle exclud- ing cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed ... ..	8,936	793	4,027	37,630	26,554	—
Number inspected ... ..	8,936	793	4,027	37,630	26,554	—
ALL DISEASES EXCEPT TUBERCULOSIS AND CYSTICERCI:						
Whole carcasses condemned	5	18	16	52	288	—
Carcasses of which some part or organ was condemned ...	4,940	430	60	10,283	11,446	—
Percentage of the number inspected affected with disease other than tuber- culosis and cysticerci ...	55.34%	56.5%	1.88%	27.47%	44.19%	—
TUBERCULOSIS:						
Whole carcasses condemned	13	4	2	—	10	—
Carcasses of which some part or organ was condemned ...	454	147	—	—	955	—
Percentage of the number inspected affected with tuberculosis ... ..	5.22%	19.04%	0.049%	—	3.63%	—
CYSTICERCOSIS:						
Carcasses of which some part or organ was condemned ...	177	8	—	38	1	—
Carcasses submitted to treat- ment by refrigeration ...	177	8	—	38	—	—
Generalised and totally condemned ... ..	4	—	—	—	—	—

(Total number of carcasses examined ... .. 77,940).

**(c) DISEASES OF ANIMALS ACT ADMINISTRATION**

Work under the Diseases of Animals Act, 1950 is carried out in the main by the department's whole time meat inspectors, although all qualified inspectors on the staff are appointed as inspectors under the Act.

The Diseases of Animals Act, 1950 is a complicated Act and its legislative requirements are affected mainly by means of Orders relating to specific diseases. The aim of these Orders is to limit the spread of notifiable animal diseases such as swine fever, foot and mouth disease, anthrax and fowl pest. Most of the work under the Act consists of controlling movement of livestock within the Borough but a considerable amount of time is spent in inspecting plant used in sterilisation of animal feeding stuffs. Certain important functions under the Act are carried out by the Veterinary Officers of the Ministry of Agriculture, Fisheries and Food and by the Police. Close and effective liaison is therefore maintained between this department, the police and the Ministry of Agriculture, Fisheries and Food.

**(d) UNWHOLESOME FOOD CONDEMNED**

The following table gives details of the nature and weight of foodstuffs found to be unfit for human consumption during the year 1958. The bulk of the foodstuffs was surrendered to the Public Health Inspectors at the time of inspection.

	T.	C.	Q.	Lbs.
Meat and Offal (at slaughterhouse, Shortacre Street) ... ..	117	5	1	0
Meat (at butchers' shops) ... ..	—	—	—	—
Tinned and other foods ... ..	4	5	3	26
Total ...	121	11	0	26

**(e) FOODS OF UNSATISFACTORY QUALITY**

There has been a great increase this year in the number of foodstuffs unsatisfactory by nature or substance, brought to the office by members of the public. Listed below are the foodstuffs which were the subject of complaint:—

Loaf of bread containing apple core;

Loaf of bread containing piece of paper;

Loaf of bread affected with mould;

Load of bread containing oil stain;

Pork pie containing a fly;

Pork pies affected with mould (3 separate instances);



Sausage roll affected with mould;  
 Crumpets affected with mould;  
 Christmas pudding affected with mould;  
 Chocolate meringue affected with mould;  
 Liquid magnesia in bottle containing broken glass;  
 Milk in bottle containing broken glass;  
 Mincemeat in jar containing broken glass;  
 Café meal containing piece of knife blade;  
 Mineral water bottle in dirty condition;  
 Cream bottle in dirty condition.

Legal proceedings were taken against a trader who sold a pork pie affected with mould; details of the prosecution are given in Part 8 of the report. In all other cases vendors and manufacturers were notified, enquiries made as to the probable cause of the offence and where appropriate the sellers' or makers' premises were visited and inspected. The circumstances of the sales, together with explanations offered by vendors and manufacturers, were reported to the Committee, who dealt with all but one of the cases by the issue of warning letters.

#### (f) MILK

#### **Sampling under the Food and Drugs Act, 1955**

During the year 110 samples of milk were submitted to the Public Analyst for chemical analysis. All these samples satisfied the presumptive standards for milk fat content and 108 of them satisfied the standard for milk solids-not-fat. The 2 remaining samples were deficient in milk solids-not-fat but these 2 samples satisfied the freezing point test. All samples were therefore regarded as genuine.

A sample of sterilised milk, alleged by a member of the public to have caused food poisoning, was submitted for chemical analysis; the analyst's report indicated that the allegation was unfounded.

#### **Inspection of Dairies**

There has been some major refitting of machinery this year in the two processing dairies. This has involved, in one dairy, the fitting of two new bottle washing machines of latest design to unload and load crates of bottles automatically, while a new washing and bottling plant has been installed in the other dairy.

On 20 occasions batches of 6 x 1 pint bottles were taken from washing machines and submitted for bacteriological examination in order to determine the efficiency of the washing process. Fifteen of

these batches gave satisfactory results with a mean average plate count of 163 organisms; three batches were fairly satisfactory with a count of 1,471 organisms; two batches were unsatisfactory having counts of 2,698 (bacteriological counts in excess of 2,000 organisms are regarded as unsatisfactory).

### **Milk (Special Designation) Regulations**

The results of 620 samples of milk tested at the Public Health Laboratory, Stafford, during the year are set out in Table 4 on page 66.

452 samples were submitted for the Methylene Blue Test but 58 of these were declared "void" because the atmospheric shade temperature at the laboratory had exceeded 65°F during the compulsory holding time. Four of the remaining 394 samples failed the test: these were—1 T.T. Channel Islands farm bottle milk; 1 T.T. (Pasteurised) Channel Islands milk; 1 T.T. (Pasteurised) Milk and 1 Pasteurised milk. All four unsatisfactory samples were bottled in areas outside Walsall, and the appropriate authorities were notified of the failures.

The Phosphatase Test was applied to 372 samples of milk to determine whether or not pasteurisation was satisfactory; 370 of these samples passed the test and 2 failed it. The 2 which failed the test were part of 3 samples taken from a single consignment of pasteurised milk from a local dairy; the third sample was satisfactory. Further testing and examination during several plant runs failed to reveal the cause of the failure but no subsequent samples from this dairy failed the Phosphatase Test.

### **Biological Tests**

Biological tests for Tubercle Bacilli and Brucella Abortus were carried out on 52 samples of milk taken at local farms. Tubercle Bacilli were found in a sample of milk from one farm. The Ministry of Agriculture, Fisheries and Food was notified and as a result of the investigation by a Veterinary Officer of the Ministry, one cow was slaughtered under the Tuberculosis Order, 1938.

No Brucella Abortus organisms were found in any of the samples.

### **(g) ICE CREAM**

#### **Ice Cream (Heat Treatment) Regulations, 1947 to 1952**

There are now 6 manufacturers of ice cream in Walsall; 4 of the manufacturers heat treat the ice cream on their own premises, 1 manufacturer freezes a mixture which has previously been heat treated by another manufacturer, while the remaining manufacturer uses the



cold mix method (that is, he reconstitutes the ice cream from a powder which has been heat treated during its manufacture).

During the year 106 samples of ice cream were submitted for the Methylene Blue test and the results of these samples are set out in Table 5 on page 67.

The Methylene Blue Test is a provisional bacteriological grading test and it will be seen from the results of the samples that this year there has been a general improvement in the bacteriological quality of ice cream compared with 1957. The improvement is partly due to the correction of a small fault in processing at one of the heat treatment plants.

### **Food Standards (Ice Cream) Order, 1953**

All the 24 samples of ice cream submitted for chemical analysis during 1958 satisfied the compositional standards laid down by the Order. The average composition of the samples is set out below; the percentages in brackets are the minimum standards required by law.

Milk Solids not Fat	...	...	...	11.68%	(7.5%)
Fat	...	...	...	9.05%	(5.0%)
Sucrose	...	...	...	13.71%	(7.5%)

### **(h) FOOD HYGIENE**

Because of staff difficulties it has not been possible during the year to carry out routine inspections of food premises with a view to enforcing the provisions of the Food Hygiene Regulations, 1955. In the main inspections have been confined to those premises in respect of which complaints have been received or from which unsatisfactory articles of food have been sold.

The meat inspectors were, however, able to make a number of visits to butchers' shops in connection with the Food Hygiene Regulations. The meat inspectors from time to time inspect vans collecting meat from the slaughterhouse and it was necessary in one case to prosecute the owner of a van for failing to comply with certain requirements of the Food Hygiene Regulations. The prosecution is summarised in Part 8 of the report which deals with legal proceedings.

### **(i) SAMPLING—FOODS AND DRUGS ACT, 1955**

During the past year 208 samples of food and drugs (54 formal samples and 154 informal samples) were sent to the Public Analyst for chemical analysis. Of this number 110 were samples of milk. Of these 208 samples 8 (that is, 3.84 per cent.) were reported as unsatisfactory but none of the 110 milk samples was unsatisfactory.



## DETAILS OF UNSATISFACTORY SAMPLES

Sample serial No.	Article	Formal or Informal	Nature of contravention	Action taken
1	Mixed Peel	O	Contained 25 parts per million copper (recommended maximum 20 parts per million)	Reported to Health Committee. Manufacturers advised
25 & 26	Apples	I	The amounts of lead and arsenic present were greater than the recommended maxima.	Reported to Health Committee. Retailers returned the consignment consisting of 26 cases (40 lbs each case) to the wholesalers.
37	Self-raising flour	I	Deficient of 16.67% Aneurine Hydrochloride (Vitamin B.1)	Reported to Health Committee. Manufacturers advised
67	Cherry Genoa Cake	I	Insufficient butter fat.	} Manufacturers advised and labels corrected.
68	Sultana Slab Cake	I	The 2 samples were wrongly labelled as containing butter.	
158	Gingerbreads	I	Insufficient butter fat. 3% instead of 5% recommended by Society of Public Analysts.	Representations made to Manufacturer.
179	Marzipan Substitute	I	Unsatisfactory list of ingredients; sample contained liquid glucose and this was not specified.	Representations made to Manufacturers who subsequently amended the label.

Note.—“O” indicates an official or formal sample  
 “I” indicates an informal sample.

### Detailed List of Samples

(Except where otherwise indicated, one sample of each commodity was taken).

Apples 3; Apricots (dried); Aspirin tablets 2; Bicarbonate of Soda; Butter 3; Buttered Cheese Spread; Cakes containing Butter 13; Camphorated Oil; Castor Oil; Chicken Fillets; Chutney; Corn Meal; Cream; Currants; Curry Powder; Flour (plain); Flour (self-raising) 4; Garden Peas; Gingerbreads; Glace Cherries 2; Ground Almonds 3; Hydrogen Peroxide Solution; Ice Cream 24; Lard; Lemon Squash; Macaroon Paste; Malt Vinegar 3; Marzipan; Marzipan Substitute 2; Milk 110; Mixed Fruit (dried); Olive Oil; Orange Drinks 4; Orange Squash 3; Dried Milk; Peel (candied) 4; Pepper (cayenne); Peppermint Lumps made with Butter; Puff Pastry; Raisins; Spinach (canned); Sterilised Milk.

TABLE 4

THE MILK (SPECIAL DESIGNATIONS) REGULATIONS, 1949 TO 1954  
RESULTS OF BACTERIOLOGICAL EXAMINATION OF MILK, 1958

MILK DESIGNATION	SUMMARY OF RESULTS				PRESCRIBED TESTS						BIOLOGICAL TESTS			
					Methylene blue		Phosphatase		Turbidity		Tubercle Bac.		Br. Abortus	
	Satis- factory	Unsatis- factory	Void *	Total	Satis- factory	Unsatis- factory	Satis- factory	Unsatis- factory	Satis- factory	Unsatis- factory	Nega- tive	Posi- tive		
T.T. Channel Islands (farm bottled)	21	1	—	22	21	1	—	—	—	—	—	—	—	—
T.T. Channel Islands (Pasteurised)	62	1	7	70	62	1	63	—	—	—	—	—	—	—
T.T. (Pasteurised)	103	1	13	117	103	1	104	—	—	—	—	—	—	—
Pasteurised														
(Channel Islands)	19	—	3	22	19	—	19	—	—	—	—	—	—	—
Pasteurised	94	1	21	116	94	1	95	—	—	—	—	—	—	—
Pasteurised														
(Schools Milk)	89	2	14	105	89	2	89	2	—	—	—	—	—	—
Sterilised..	116	—	—	116	—	—	—	—	116	—	—	—	—	—
T.T. (Bulk)	12	—	—	12	—	—	—	—	—	—	12	—	12	—
Undesignated (Bulk)	39	1	—	40	—	—	—	—	—	—	39	1	40	—
TOTALS ..	555	7	58	620	390	4	370	2	116	—	51	1	52	—

\* Samples declared "Void" by reason of atmospheric shade temperature exceeding 65°F. at the Laboratory.

TABLE 5

RESULTS OF ICE CREAM SAMPLES, 1958  
METHYLENE BLUE REDUCTION TESTS

Classification	No. of samples	Percentage of total samples	Number in each Grade				Percentage in each Grade			
			Grade 1	Grade 2	Grade 3	Grade 4	Grade 1	Grade 2	Grade 3	Grade 4
Local Manufacture (Heat Treatment) ..	58	54.72%	42	3	6	7	72.42%	5.17%	10.34%	12.07%
Local Manufacture (Cold Mix) ..	5	4.72%	5	—	—	—	100.00%	—	—	—
Local Manufacture (Totals)	63	59.44%	47	3	6	7	74.61%	4.76%	9.52%	11.11%
Other Manufacture ..	43	40.56%	41	1	1	—	95.34%	2.33%	2.33%	—
All Samples (Totals) ..	106	100.00%	88	4	7	7	83.02%	3.78%	6.60%	6.60%

	Grades 1 & 2			Grades 3 & 4	
1955	...	88.19%	...	11.81%	
1956	...	91.75%	...	8.25%	
1957	...	81.71%	...	18.29%	
1958	...	86.80%	...	13.20%	



**PART 4—WATER**

The water supply in Walsall for drinking purposes is supplied by the South Staffordshire Waterworks Company and is satisfactory as regards quality and quantity.

Samples of water submitted for bacteriological examination during the year were taken either from bathing establishments or from a bore supplying a dairy. The results of these samples are set out in Table 6 on page 69. It will be seen from the table that one sample from the open air swimming bath and one from the bore supply were bacteriologically unsatisfactory while another from the bore supply was classified as suspicious. Samples taken after these unsatisfactory and suspicious samples proved to be satisfactory.

Two samples of water from the mains of the South Staffordshire Waterworks Company were submitted for chemical analysis and were found to be satisfactory.

TABLE 6  
RESULTS OF WATER SAMPLES, 1958

Source of Samples	Classification by Coliform Count				Totals
	0 Highly Satisfactory	1 to 3 Satisfactory	4 to 10 Suspicious	Over 10 Unsatis- factory	
1st Class Swimming Bath ... ..	31	—	—	—	31
2nd Class Swimming Bath ... ..	11	—	—	—	11
Brine Swimming Bath ... ..	10	—	—	—	10
Open Air Swimming Bath ... ..	5	—	—	1	6
Bore ... ..	25	—	1	1	27
Totals ... ..	82	—	1	2	85

Two samples of water from the mains supply were examined chemically and found to be satisfactory.

## PART 5—ATMOSPHERIC POLLUTION

### General Policy

During the year consultations have continued with managements in order to try to minimise the emission of smoke, fumes and grit from industrial premises.

With the co-operation of the Borough Surveyor 139 plans of industrial or commercial premises were inspected; 32 of these proposals involved processes liable to cause smoke nuisances, 9 to cause dust emissions and 19 to cause fume nuisances. Modifications to plant were suggested in appropriate instances.

### Improvements in Industrial Fuel Burning Plant

One vertical boiler, one Lancashire boiler and two annealing ovens have been converted to oil firing; these conversions have greatly reduced the risk of smoke emissions and eliminated grit emissions from the plants in question.

### Dust and Fume Control

There have been several improvements to dust collecting equipment at various premises within the Borough, although much further work remains to be done, particularly in controlling dust and fume emissions from cupolas.

### Clean Air Act, 1956

Because of staff difficulties it was not possible to make any progress during the year with regard to the establishment of smoke control areas. It is however hoped early in the new year to begin a survey for smoke control purposes of the central area of the town.

Most of the work under the Clean Air Act has consisted of inspecting industrial premises and of advising managements on appropriate remedial measures.

In one case it was necessary to take legal proceedings for the abatement of a smoke nuisance. The case was rather an unusual one in that action was taken under Section 16 of the Act and not under those provisions of the Act relating to emissions of dark smoke. The Council sought an Order from the Court prohibiting a metallurgical firm from burning cable or other material in the open air in such a manner as to be a nuisance to the inhabitants of the neighbourhood.

The firm pleaded guilty but resisted the application of the Council for an Order under Section 16(2) of the Clean Air Act, 1956. The Court granted an Order in terms somewhat similar to those asked for by the Council and awarded certain costs against the offending firm. The case attracted considerable interest in the technical press throughout the country.

### Measurement of Air Pollution.

The report of chemical analyses of the contents of the deposit gauges and lead peroxide instruments are set out in tabular form on pages 71, 72 and 73, and in graphical form on pages 74, 75 and 76.



Co-operation with the Department of Scientific and Industrial Research in the investigation of atmospheric pollution has been maintained throughout the year and each month the results of the analyses of the six deposit gauges, nine lead peroxide instruments and one volumetric apparatus are sent to that Department. The amount of zinc oxide deposited in six areas of the town is also calculated monthly.

The amount of deposited matter for 1958 is slightly less than for the preceding year (1957) and this year the amount of sulphur dioxide present also shows a slight decrease.

The volumetric apparatus sited at the Council House gives a day to day indication of smoke and sulphur dioxide in the air of the centre of the town. The figures for 1958 show a decrease in suspended impurity (smoke) and in the amount of sulphur dioxide compared with 1957. The monthly average figures for the years 1957 and 1958 are tabulated on page 73 and appear as a graph on page 74. It is interesting to note the seasonal variation in both forms of pollution.

I am indebted to the Sewage Works Manager (Mr. P. J. Barnes, B.Sc.) and his staff for carrying out all chemical analyses in connection with atmospheric pollution and to Mr. J. C. W. Day, F.R. Met. Soc., for supplying meteorological information.

TABLE 7

## Deposit Gauges—Records of Deposits, 1958

Deposits in tons per square mile per month

Month	Bloxwich (Station St.)	North (Transport Depot)	Central (Hatherton Road)	East (Sutton Road)	South (Brockhurst)	South-West (Alumwell School)
Jan.	—	—	21.60	11.39	12.67	12.29
March	17.17	14.64	22.11	11.13	15.47	12.31
April	9.73	10.63	11.74	7.31	9.12	7.94
May	15.21	22.76	19.97	11.01	12.80	9.37
June	14.26	21.90	20.19	11.04	10.62	12.40
July	13.22	18.78	22.12	11.74	11.80	12.90
Aug.	9.89	17.11	18.74	5.83	8.53	7.60
Sept.	20.56	25.39	18.45	—	11.21	11.44
Oct.	11.88	19.42	17.34	5.77	8.69	6.70
Nov.	15.85	20.06	29.87	6.96	12.74	10.33
Dec.	18.26	32.23	24.40	8.50	14.13	14.93
<b>Total</b>	<b>168.43</b>	<b>218.70</b>	<b>250.26</b>	<b>105.13</b>	<b>140.18</b>	<b>130.91</b>

## MONTHLY AVERAGE:—

1958 ...	15.31*	19.88*	20.85	9.56*	11.68	10.91
1957 ...	20.11	22.05	19.69***	9.44	13.81	13.55**
1956 ...	16.93**	22.78	20.98	10.81	14.73	13.74
1955 ...	18.24	20.30**	21.65*	9.36	14.74	12.76**

\* Averages for 11 months only.

\*\* Averages for 10 months only.

\*\*\* Averages for 9 months only.

1958 Average for whole town	...	...	14.70 tons/sq. mile/month
1957 Average for whole town	...	...	16.44 tons/sq. mile/month
1956 Average for whole town	...	...	16.66 tons/sq. mile/month
1955 Average for whole town	...	...	16.17 tons/sq. mile/month

TABLE 8

## Lead Peroxide Gauges—Record of Sulphur Pollution, 1958

Weight of Sulphur Trioxide collected expressed in Milligrammes of SO<sub>3</sub> per 100 square centimetres per day.

Month	Blox- wich	North (Trans- port)	Central (Hather- ton Rd.)	East (Sutton Road)	South (Brock- hurst)	Blox- wich Road	Manor Hospital	Dartmouth Avenue	Trees Road
Jan.	5.03	5.25	5.30	1.80	3.79	3.48	3.37	3.88	2.74
Feb.	3.20	4.61	4.46	1.23	3.62	2.74	2.66	2.47	2.49
Mar.	3.88	3.43	3.65	1.05	2.52	2.34	3.30	1.53	1.54
April	2.74	2.55	2.89	0.83	2.10	1.80	2.37	1.51	1.53
May	2.61	2.72	2.41	0.51	2.08	1.83	1.60	1.25	1.01
June	1.90	1.76	2.22	0.48	1.51	1.36	1.13	0.85	1.42
July	1.36	1.53	1.55	0.33	1.42	1.01	0.95	0.77	0.78
Aug.	1.62	1.20	1.48	0.17	1.52	1.16	1.02	0.83	0.60
Sept.	2.30	1.81	1.90	—	2.09	1.30	1.64	0.92	0.83
Oct.	3.31	3.54	3.48	1.04	3.27	2.10	2.02	1.52	1.49
Nov.	4.32	3.56	4.06	1.31	3.31	2.47	3.12	1.82	1.91
Dec.	5.02	4.73	4.26	1.67	3.99	3.26	3.70	2.25	2.32
Totals	37.29	36.69	37.66	10.42	31.22	24.85	26.88	19.60	18.66

## MONTHLY AVERAGES (CRUDE):

1958:	3.11	3.06	3.14	0.95*	2.60	2.07	2.24	1.63	1.55
1957:	3.39**	3.84	3.45**	1.01	2.60	2.24	2.45	1.75	1.93**
1956:	3.09	3.14	3.44	1.07	2.79	2.34	2.57	1.86	1.63
1955:	2.79	3.06*	3.39	0.99	2.49	2.08	2.55	1.69	1.54*

\* Averages for 11 months.

\*\* Averages for 10 months.

1958 Average for whole town	...	...	2.26 M.Gms./100 sq. cms./day
1957 Average for whole town	...	...	2.52 M.Gms./100 sq. cms./day
1956 Average for whole town	...	...	2.44 M.Gms./100 sq. cms./day
1955 Average for whole town	...	...	2.29 M.Gms./100 sq. cms./day

## ANNUAL RAINFALL

1958	...	...	34.39 inches
1957	...	...	27.97 inches
1956	...	...	26.84 inches
1955	...	...	26.28 inches

**TABLE 9****VOLUMETRIC METHOD—RECORDED DAILY**

Apparatus situate at Council House, Walsall.

Suspended Impurity (Smoke) expressed as milligrammes  
per cubic metre.

Sulphur Dioxide expressed as parts per million.

## MONTHLY AVERAGES FOR 1957 AND 1958

				Smoke		Sulphur Dioxide		
Month				1957	1958	1957	1958	
January	...	...	.321	.225	...	.114	.091	
February	...	...	.378	.190	...	.192	.073	
March	...	...	.309	.180	...	.110	.071	
April	...	...	.149	.147	...	.068	.056	
May	...	...	.126	.107	...	.065	.037	
June	...	...	.101	.101	...	.049	.038	
July	...	...	.096	.086	...	.048	.026	
August	...	...	.097	.087	...	.029	.025	
September		...	.130	.103	...	.042	.028	
October	...	...	.203	.174	...	.075	.057	
November	...	...	.214	.287	...	.076	.095	
December	...	...	.250	.263	...	.093	.091	
Average for year				.198	.163	...	.080	.057



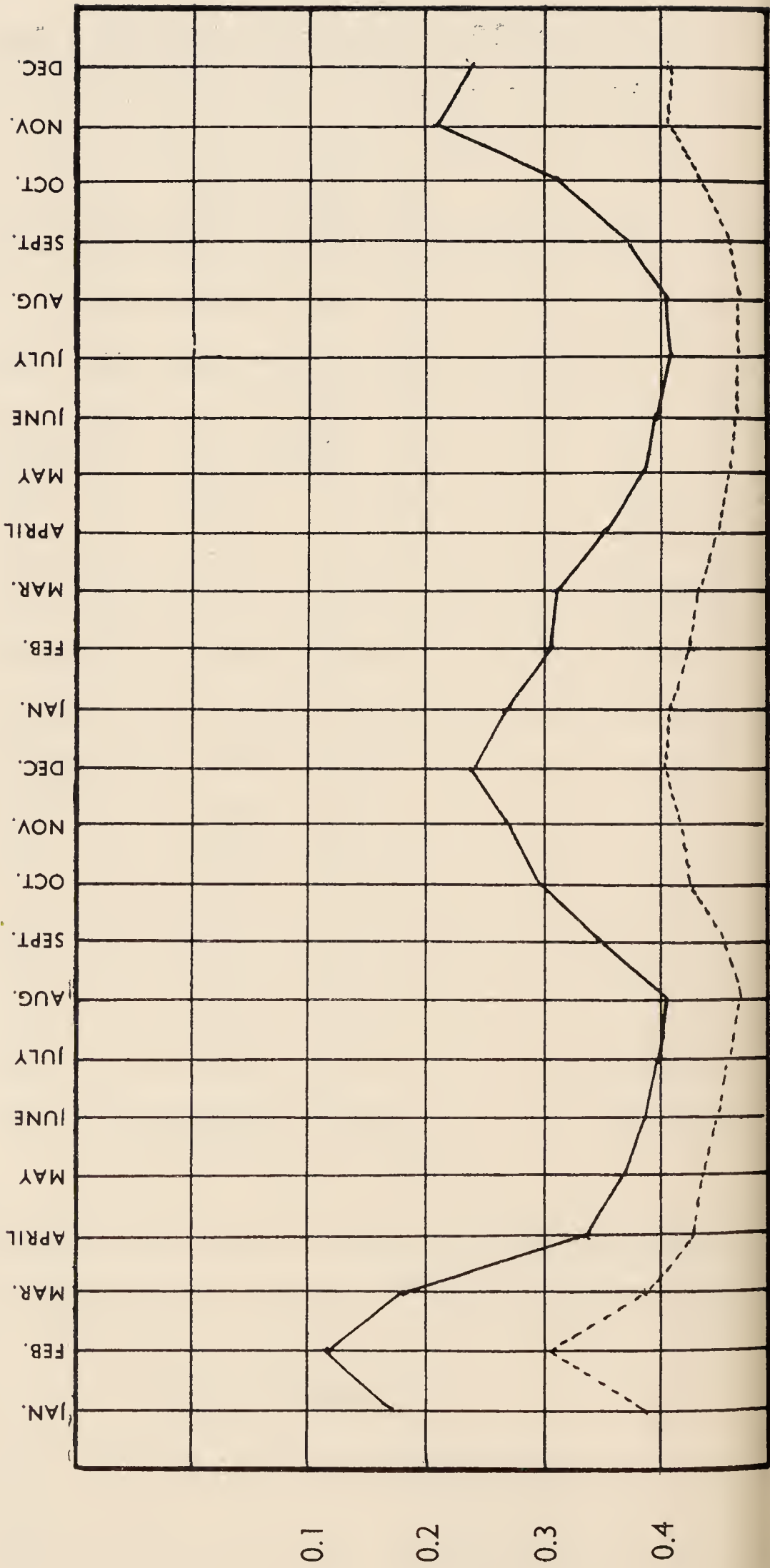
VOLUMETRIC METHOD

MONTHLY AVERAGES FOR 1957—58

— SUSPENDED IMPURITY (SMOKE) EXPRESSED AS MILLIGRAMMES/CU. METRE.  
..... SULPHUR DIOXIDE EXPRESSED AS PARTS PER MILLION.

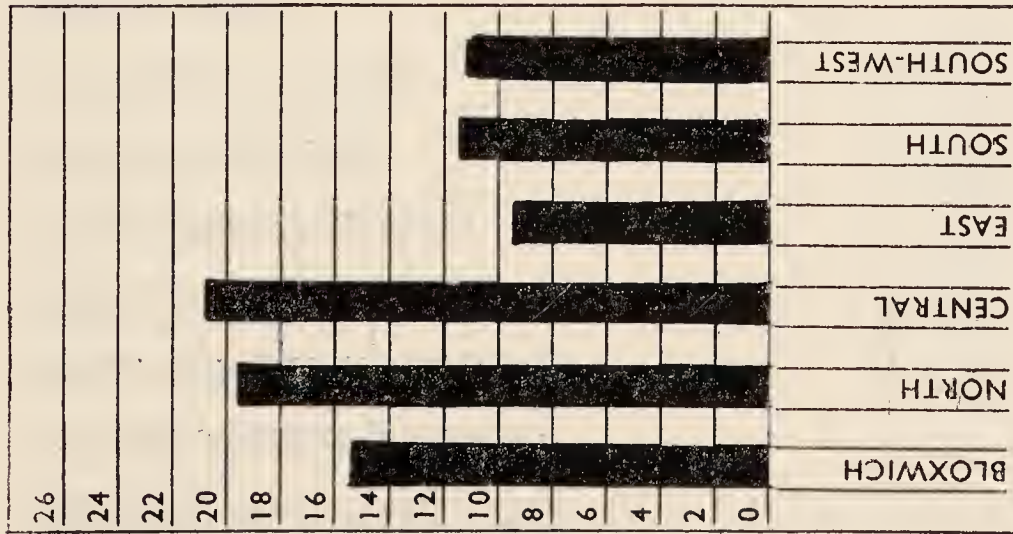
1958

1957

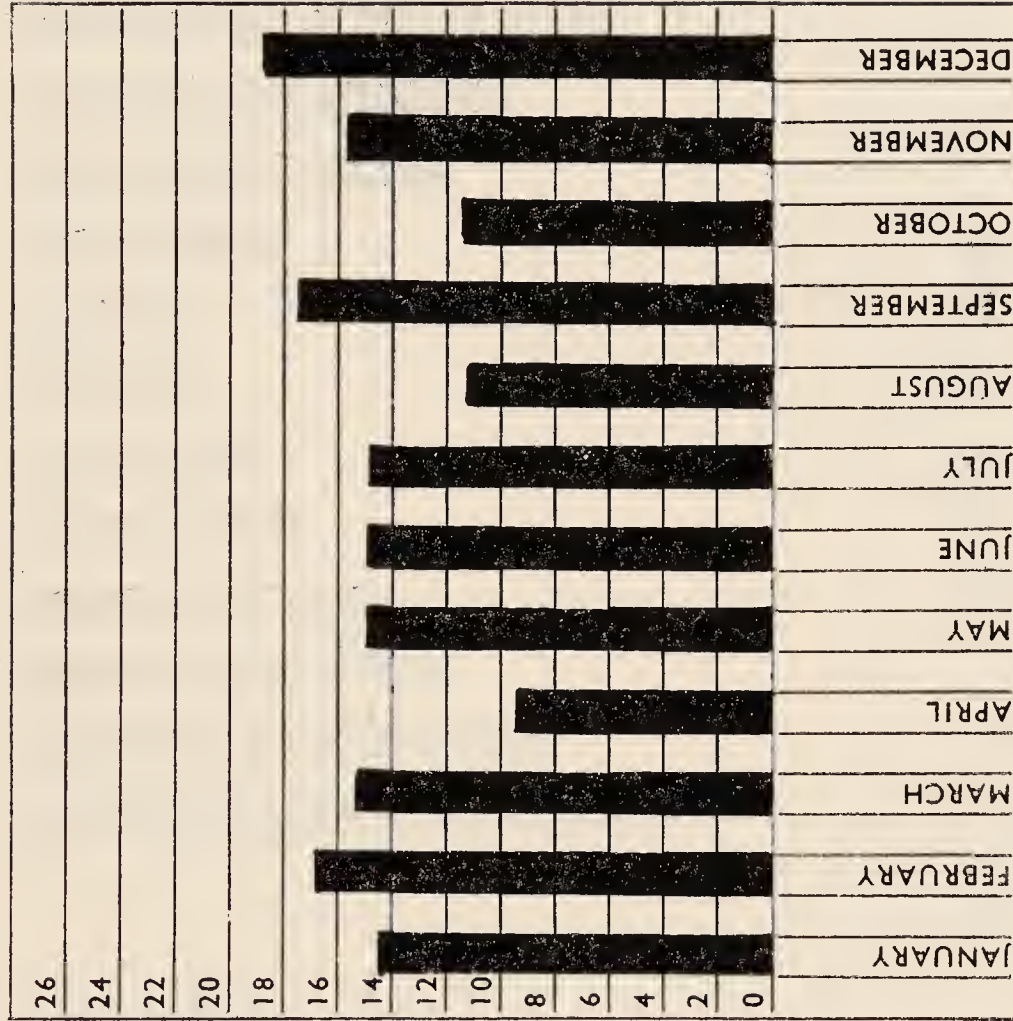


DEPOSIT GAUGES 1958

DISTRICT INCIDENCE  
(AVERAGES)



SEASONAL INCIDENCE  
(AVERAGES)



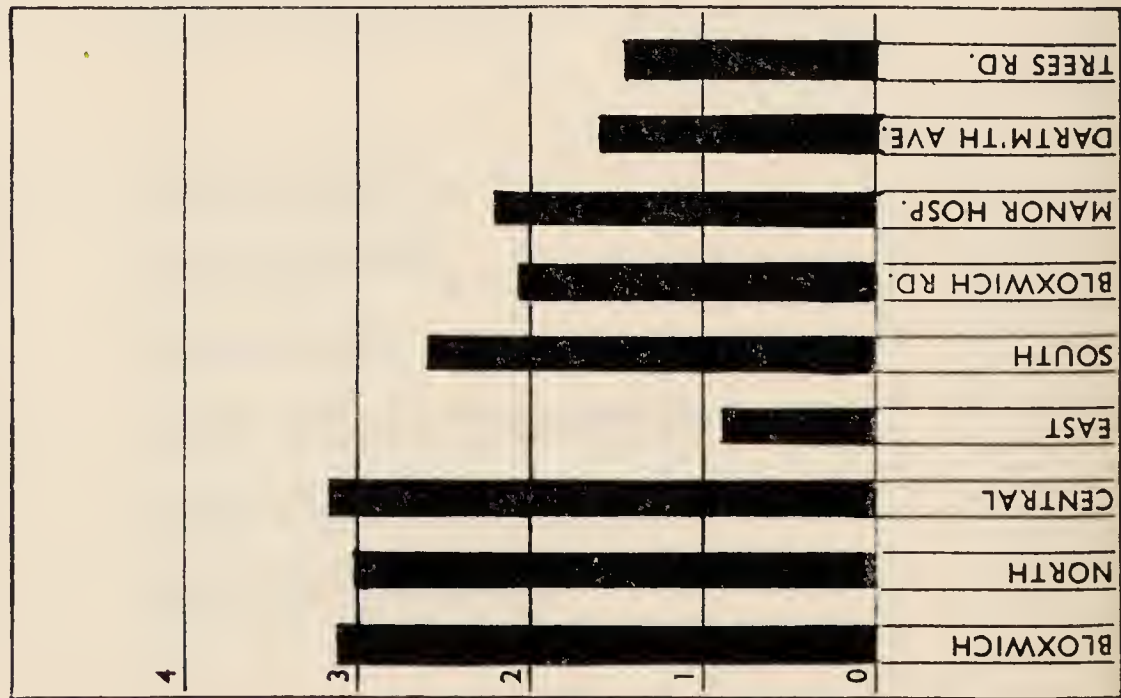
TONS/SQ.  
MILE PER  
MONTH

TONS/SQ.  
MILE PER  
MONTH

SEASONAL  
AVERAGES  
FOR WHOLE  
OF TOWN

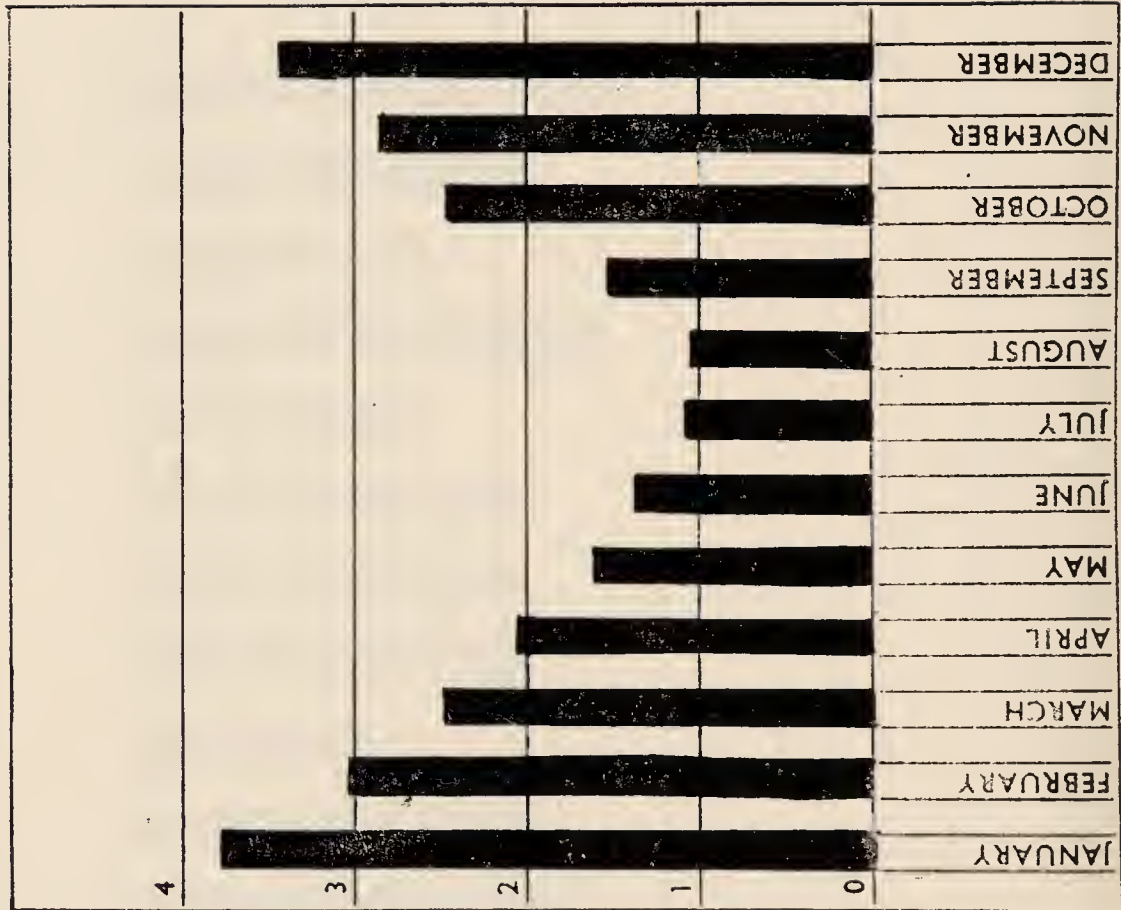
# LEAD PEROXIDE GAUGES 1958 (SULPHUR DIOXIDE)

DISTRICT INCIDENCE  
(CRUDE AVERAGES)



M. Grams.  
 $SO_3/100 Sq. Cms./Day$

SEASONAL INCIDENCE  
(AVERAGE)



M. Grams.  
 $SO_3/100 Sq. Cms./Day$



## PART 6—DISINFESTATION

### Hydrogen Cyanide and other Disinfestation Procedures

As has been the practice in Walsall for a number of years, removals in connection with all rehousing from slum clearance properties are carried out by this department and the furniture from the affected properties is disinfested as a routine measure by exposure to hydrogen cyanide gas in the removal van. In such cases both the removal and treatment are carried out irrespective of presence or absence of vermin in the affected properties. In addition the furniture and effects of all prospective council house tenants are inspected for the presence of bed bugs, timber boring beetles or other insects and disinfestation treatment is carried out wherever appropriate. During the past year, the furniture and effects of 365 families were disinfested by hydrogen cyanide gas. A further 216 council owned houses were also treated with liquid or powder insecticides because of the presence of timber beetles, cockroaches, ants, bugs, fleas or other insects. The whole of the work so far referred to was carried out on behalf of the Housing Committee.

Because of insect infestations of various kinds, 136 privately owned houses were also disinfested.

### Disinfection and Disinfestation of Articles

The steam disinfector at the Department's Depot at Bloxwich was in operation intermittently throughout the year for the treatment of bedding, clothing and other articles which had either been exposed to infection or had been in contact with vermin. A certain amount of work was also done on behalf of neighbouring local authorities who do not possess the necessary apparatus.

### Rodent Control

Because of the amount of work involved in rehousing tenants from slum clearance properties it was not possible during the year to carry out systematic poison baiting of sewers in the town. It is a matter for regret that this work, which should be carried out twice a year and is of considerable value in limiting the rat and mice population, could not be done. Control measures were, however, carried out at Bescot and Brockhurst Sewage Works, the Arboretum and the brook course.

### Income

While much of the work of disinfestation and rodent control, particularly on domestic premises, is carried out free of charge, charges are made in certain other cases.

During 1958 £390 was received for such work compared with £514 during the previous year. The £390 was made up as follows:—

General Disinfestation Work ...	...	£179
Rodent Control Work ...	...	£211

## PART 7—GENERAL

### Factories, Shops and Offices

There are now 834 factories on the departmental register compared with 846 on last year's register.

The visits paid to factories in connection with the Factories Act, 1937 are analysed in Tables 8 and 9 on pages 80 and 81 of the report. Because of pressure of work it was not possible to make regular periodic visits to factories; most of the visits were made as a result of complaints received from H.M. Inspector of Factories.

During the year numerous plans of extensions and alterations to factories, shops and offices were examined in order to ensure that the premises concerned would comply with the appropriate requirements of the Factories Act, Food and Drugs Act and Shops Act. Visits were made to certain of these premises but these visits are not recorded in Tables 8 and 9.

### Fertilisers and Feeding Stuffs Act, 1926

No samples of fertilisers or feeding stuffs were taken during the year under review.

### Supply of Dustbins

The scheme under which the Council supplies dustbins to houses and makes an annual charge on the owner or occupier continues to work satisfactorily. In consequence of action by this department 287 bins were supplied under the Council's scheme compared with 21 supplied by owners or occupiers.

Many additional dustbins were of course bought privately and independently of any action by this department.

### Cinemas

Visits to cinemas by inspectors have, because of pressure of other works, been limited to the investigation of complaints about sanitary accommodation and cleanliness.

### Rag Flock and Other Filling Materials Act, 1951

The main aim of this Act is to ensure that filling materials used in upholstered and similar articles are clean. The Act requires premises on which filling materials are used in the manufacture of bedding, toys and baby carriages, etc., to be registered and premises on which rag flock is manufactured or stored for certain purposes to be annually licensed.

There are no premises in Walsall where rag flock is made or stored for distribution to registered premises, but there are three factories at which rag flock is used for various trade purposes and these premises are visited from time to time.



The Prescribed Analysts are Messrs. T. C. Williams and L. W. Ogden of Slumberland (Research) Ltd., Stockport. Nine samples of rag flock were taken during the year and submitted to them for analysis; all conformed to the requirements of the Regulations.

### **Pet Animals Act, 1951**

This Act, which precludes a person from occupying a pet shop unless he holds a licence granted by the local authority, applies to all premises (including private houses) where the business of selling animals as pets is carried on.

During the year 10 applications for licences were received and all were granted, subject to compliance with conditions.

## **PART 8—LEGAL PROCEEDINGS**

It was necessary during 1958 to take legal proceedings in respect of contraventions of the Food Hygiene Regulations, 1955, the Public Health Act, 1936, the Food and Drugs Act, 1955 and the Clean Air Act, 1956.

The prosecutions under the Public Health Act were for contraventions of Section 154 and were taken in consequence of reports from officers from the Borough Police Force; the other prosecutions summarised in the table were taken by officers of this department.

Date of Proceedings	Act under which proceedings were taken	Remarks
8th January	Food Hygiene Regulations, 1955. Reg. 29 (1)	Fine of £5 and £3 3s. advocate's fee.
5th February	Public Health Act, 1936, Section 154.	£3 fine.
28th July	Ditto	Fined 20s.
29th October	Ditto	Fined 40s.
28th July	Food and Drugs Act, 1955, Section 2.	Fined £25. Special costs £1.
22nd September	Clean Air Act, 1956, Section 16.	Order made to discontinue burning cable, etc., in such manner as to cause nuisance. Advocate's fee £3 3s.

In addition to the proceedings summarised above, prosecutions were also taken against many occupiers of caravans for unauthorised parking. In most of these cases fines of £2 or £3 were imposed, the fines to be paid forthwith with imprisonment in default.



TABLE 8

# FACTORIES ACTS, 1937 AND 1938

Prescribed particulars on the administration of the Factories Act, 1937.

1.—**INSPECTIONS** for purposes of provisions as to health (including inspections made by Public Health Inspectors)

Premises (1)	M/c line No. (2)	Number on Register (3)	Number of			M/c line No. (7)
			Inspections (4)	Written notices (5)	Occupiers prosecuted (6)	
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities ..	1	30	2	1	—	1
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	2	802	53	13	—	2
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises) .. .. .	3	2	—	—	—	3
TOTAL .. .. .		834	55	14	—	

## 2.—CASES IN WHICH DEFECTS WERE FOUND

Particulars (1)	M/c line No. (2)	Number of cases in which defects were found			Number of cases in which prosecutions were instituted (7)	M/c line No. (8)
		Found (3)	Remedied (4)	Referred To H.M. Inspector (5)	By H.M. Inspector (6)	
Want of cleanliness (S.1)	4	—	—	—	—	4
Overcrowding (S.2)	5	1	—	—	1	5
Unreasonable temperature (S.3)	6	—	—	—	—	6
Inadequate ventilation (S.4)	7	—	—	—	—	7
Ineffective drainage of floors (S.6)	8	—	—	—	—	8
Sanitary Conveniences (S.7)	9	2	1	—	2	9
(a) insufficient						
(b) Unsuitable or defective	10	16	10	—	16	10
(c) Not separate for sexes	11	2	1	—	2	11
Other offences against the Act (not including offences relating to Outwork)	12	—	—	—	—	12
TOTAL	60	21	12	—	21	60

## OUTWORKERS

In accordance with Section 110 of the Act, reports were received that 14 persons were employed as outworkers; one of these was engaged in making wearing apparel, three in the manufacture or preparation of brass and brass articles and eleven in brush making. It was not necessary to take any action in connection with these outworkers.

# REPORT

## OF THE

### PRINCIPAL SCHOOL MEDICAL OFFICER

For the Year ended 31st December, 1958

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MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to submit my report on the School Health Service for the year ended 31st December, 1958.

For seven months of the year the medical staff of the School Health Service was undermanned owing to the departure in March of Dr. H. C. Milligan to be Medical Officer of Health in West Hartlepool, a successor to Dr. G. P. A. Evans, who was promoted to Dr. Milligan's position in the Health Department, not taking up duty until October. However we have been fortunate in having the services of Dr. J. R. White since then and also, since a later date, by an increase in establishment, those of Dr. S. J. Toogood. The result is that, at the time of writing, we have a full complement of medical officers.

These new appointments were not early enough in the year to prevent a diminution of the number of periodic medical inspections carried out—a total of 5,843 compared with 8,905 in 1957, representing a percentage decrease of about 34, though it should be mentioned that the intensive poliomyelitis vaccination programme promoted during the year was a contributory factor of some importance in this. Re-inspections and special inspections, totalling 4,328, were approximately the same as last year.

It is regrettable that the attendance of parents of children, especially boys, of the older age groups examined continues to be unsatisfactory. This is especially marked at the final medical inspection, a most important occasion, as the boy or girl is about to be launched on a much less supervised existence. The detection and interpretation of signs of departure from normality is facilitated greatly by a concise statement of history and complaints, and as a



school child is frequently unwilling to bring forward such a statement, the presence of a parent is most valuable in making the examination the useful contribution to health and reliable instrument of early detection of disease it is designed to be.

Of the 5,843 children who underwent periodic medical inspection, 98.78 per cent. were placed in the satisfactory category with regard to their general physical condition. The small percentage classified as unsatisfactory were put under surveillance, many of them being recommended for seaside holidays, and the co-operation of specialists and general practitioners being sought where necessary.

Dental health once again compares unfavourably with general health, though the incidence of caries among those examined shows a little improvement in comparison with 1957—76 per cent. as against 82 per cent., the national average in both years being 70 per cent. The causes, as the Principal School Dental Officer points out, remain the same, namely, insufficient staff and the low natural fluoride content of our water supply. It is interesting to note the adoption of a Ministry of Education recommendation that a limited number of schools should be given annual inspections, with any necessary treatment, with a view to making the most efficient use of available professional staff. An emergency service for the school population as a whole continues to be given.

Lee<sup>1</sup>, writing in the *British Medical Journal* in March, produced evidence which appears on first reading to cast grave doubts upon the value of the routine medical examination of school children. He compared defects noted by school doctors in various parts of England and Wales unfavourably with those detected in the same individuals—boys—on the occasion of their pre-service medical. While the discrepancies pointed out are not to the credit of the school health service, it is important to put the matter in its true perspective. Firstly, the relationship between doctor and the boy being examined is quite different in the two situations. The schoolboy is not interested to any extent in the opinion which the doctor forms of his physical condition, whereas the service entrant, if he is not a volunteer, may be very interested in drawing attention to any defect which could bring about his remaining a civilian. As indicated in an earlier paragraph, this factor is of great value in the assessment of a case. Secondly, a school medical inspection cannot be, of necessity, so time-consuming or exhaustive as pre-service medical examination, and, of course, the school doctor is not seeking to determine whether the youngster before him is fit to participate in assault courses or pilot a jet fighter. Finally, there is much to be said on the credit side. Very many defects in children are brought to light by the school health service, defects which the general practitioner, who has no time to examine preventively the seemingly healthy, has not discovered, and surely a service which does such valuable work is worth not only preserving but cherishing.

The problem of educational subnormality in school children continues with us. As will be remembered, the Principal School Medical Officer after careful consideration of each case, has the responsibility of advising the Education Committee as to the most suitable treatment for the children concerned. This task would be a fairly simple one if the I.Q. (intelligence quotient) could be employed as a rule of thumb method to determine whether a child needs remedial teaching, special day school vel al. However, there are numerous factors to be taken into account and, while the work is stimulating and challenging it is also onerous as a wrong recommendation may have a most harmful effect on the individual's future. Thus the examination of the boy or girl is approached as a human problem involving not only school progress or lack of it but also the emotional and intellectual characteristics of the child, his or her adjustment to environment and the realisation by the examiner of spiritual as well as temporal needs.

The list of children awaiting places in special day school for E.S.N. children has increased once more and were it not for the fact that Walsall's new school for this purpose should be ready by September next year, the outlook for non-residential provision would be far from encouraging. This school will have accommodation for 160 pupils and will be of the utmost value in helping this category of handicapped child.

In addition to seeing a day school for E.S.N. children established in the town, the year 1959 will be marked by the inauguration of an audiometric survey scheme in which the hearing of eight year-old children will be assessed accurately, the aim being to arrange suitable treatment for those found to have a substantial degree of hearing loss. Another school clinic will be opened next March at the new local authority medical centre on Beechdale Estate. Until demand is gauged, there will be one session per week with a doctor in attendance and one when a nurse will be present to deal with minor complaints and carry out treatments prescribed by medical staff.

The school health service has been in existence for 50 years and inevitably its pattern has altered considerably. The era of dire want and widespread disease in which it was born has given way to one in which the vast majority of families can enjoy a reasonable standard of living and good health. Despite this, however, the service is just as necessary today as it was in 1908. The mature 50-year-old has problems, e.g. the increasing incidence of overweight in school children, which it did not have as an infant, and has entered spheres of activity not contemplated half a century ago. No doubt changes will continue—a viable organism cannot remain in a static condition—and provided we do not become complacent about things as they are, these changes will be for the better.

Following is a section by section report on the work of the school health service.



## 1.—SCHOOL HEALTH WORK

**Periodic Medical Examinations.**—This subject has been dealt with already in my general review of the year and a restatement of statistics would be of little value and probably somewhat tedious.

The Periodic Medical Examination of the school child has long been regarded as the principal feature of the school health service. In recent years, however, there has been some wavering in the steadfast loyalty to this principle and, indeed, in his latest report<sup>1</sup> the Chief Medical Officer to the Ministry of Education suggests that while the examination of entrants and leavers should not be tampered with, there is a case for intermediate routine examinations being replaced by medical, nursing and teaching staff conferences, and a selection of pupils being medically examined as a result of these meetings.

**School Clinics.**—These have a specialised function, namely to follow up children found at medical inspection to have defects and to deal with special problems in pupils presented by parents and teachers. Certainly there is provision for the treatment of minor illness and this is appreciated by parents, but the term "Minor Ailments Clinic" is a misnomer and therefore misleading.

Bradford Street, Field Road and Littleton Street continued to be the school clinics for Walsall. As mentioned in an earlier paragraph, a new clinic on Beechdale Estate will come into function next year. Below is set out the work of the three present clinics during the year 1958.

### BRADFORD STREET CLINIC, WALSALL.

Medical	...	...	...	3 sessions weekly
Dressings	...	...	...	6 sessions weekly
Ophthalmic	...	...	...	2 sessions weekly
Dental	...	...	...	7 sessions weekly

### LITTLETON STREET CLINIC, WALSALL.

Dental	...	...	...	9 sessions weekly
Child Guidance	...	...	...	2 sessions weekly
Speech Therapy	...	...	...	7 sessions weekly

### FIELD ROAD CLINIC, BLOXWICH, WALSALL.

Medical	...	...	...	2 sessions weekly
Dressings	...	...	...	3 sessions weekly
Dental	...	...	...	4 sessions weekly
Speech Therapy	...	...	...	3 sessions weekly

During 1958, 2,307 children consulted the doctors, many having been referred for fuller investigation to the clinics from school inspections; others were brought by parents or sent by teachers for advice. Altogether 3,415 examinations were carried out.

<sup>1</sup> Ministry of Education (1958) Report of the Chief Medical Officer for the years 1956 and 1957: 77—78 H.M.S.O. London.



The school nurses hold their own sessions at the clinics for the dressing of minor injuries and the application of treatment prescribed by the medical staff. 1,410 children attended for these purposes and a total of 6,127 attendances was made.

**Handicapped Children.**—Handicap, either physical or mental, adds greatly to the difficulty of providing educational facilities of suitable type for a child. Hence has been the evolution over the years of special schools either day or residential where the curriculum is modified so as to produce a climate in which the less fortunate among the child population may work at a pace within their capabilities and where the urgent sense of competition of the ordinary school, though not absent, is reduced to a level compatible with the well-being of such children.

A town such as Walsall cannot support a range of schools to cover all the many forms of handicap, but what we have, or rather what we shall have by next Autumn, is well-chosen. For the physically handicapped, where the disability is within reasonable limits, there is a day school—Reedswood Park School for Delicate Children—and for the educationally subnormal there are five remedial classes attached to ordinary schools, and a residential school—Beacon School, Lichfield—for E.S.N. boys. Until the new day school for E.S.N. children is opened next year, the remedial classes are not performing their true function as many children whose proper place is in such a school are being provided for temporarily in these classes. Handicapped children who do not fit into the local pattern described above, e.g. girls requiring residential E.S.N. school, receive their treatment through the co-operation of outside authorities.

During 1958, recommendations of the medical staff resulted in 7 children receiving education in their own homes, 7 being admitted to Residential Schools for Physically Handicapped children, 11 to Residential Schools for E.S.N. children and 1 to a Residential School for Maladjusted Children.

At the end of the year, there were 184 children awaiting places in day special schools for E.S.N. children, an increase of 34 on the figure I gave in my 1957 report and an indication of how vital the new school for this purpose will prove.

## 2.—PUPILS EXAMINED

The following table shows the average heights and weights of all pupils medically inspected during 1958:—

	Number			Height, ins.			Weight, lbs.	
	Boys	Girls		Boys	Girls		Boys	Girls
New Entrants (5+)	757	782	...	43.0"	42.7"	...	43.6	42.4
Juniors ... (10+)	916	887	...	54.9"	55.7"	...	71.3	76.6
Seniors ... (12+)	406	395	...	58.8"	59.3"	...	91.1	96.0
Seniors ... (14+)	753	756	...	63.9"	62.0"	...	114.3	110.5

A comparison of the average weight in school-leaving boys in 1957 and 1958 is interesting. In 1957 the average was 110.2 lbs.; in 1958, 114.3 lbs. This is a considerable increase in the average weight of this group in one year, but may be indicative of excess consumption of carbohydrate rather than an actual improvement in nutrition.

### **3.—REFERRALS FOR SPECIALIST OPINION AND THE WORK OF THE SCHOOL NURSES**

900 children were referred for ophthalmic opinion on account of errors of refraction and squint and spectacles were prescribed in 730 cases. 273 children received operative treatment for diseased tonsils and adenoids, 3 for other nose and throat conditions, 3 for ear conditions and 12 referrals received treatment for a miscellaneous group of conditions.

Apart from their valuable work at school medical inspections, school clinics and immunisation sessions, the school nurses have a most important rôle in the visits they pay to the homes of school children. Not only does their nursing training stand them in good stead in this regard, but also this branch of their work calls for the exercise of tact and a warm understanding of very human problems. During the year the nurses made 1,753 domiciliary visits.

### **4.—UNCLEANLINESS**

Though properly a part of the work of the nursing staff, especially the assistant nurses, the management of uncleanness is of sufficient importance to merit a separate description.

The assistant nurses have been able to devote most of their time to the work of cleanliness inspections in schools, and a total number of 61,037 inspections was carried out.

The result of this concentrated effort shows a little improvement in the general standard of cleanliness. Some 1,708 children were found to be unclean during the year, but of these, 691 children were found to have nits on only one occasion during the year and only 79 children were found to be infested with lice. The number of lice infested children is the smallest for many years and shows a definite improvement. Headteachers have been extremely helpful and have shown a keen interest in the achievement of a good standard of cleanliness in the schools. Several schools have requested a fortnightly re-inspection visit which has greatly helped to reduce the number of persistently unclean children. The Assistant nurses have followed up their work in schools with visits to the homes in all cases of lice infestation, and also where children are frequently found to have nits. A total number of 806 home visits was made during the year. D.D.T. head lotion continues to be distributed free of charge.

18 children were treated for scabies during the year. Although this number is higher than last year when we had only 8 cases, it is mainly due to two large families, all of whom became infected, and it has not been necessary to re-open a regular clinic, each case being treated by appointment only.



## 5.—INFECTIOUS DISEASES

**Diphtheria.**—I have to report the death of a schoolboy from this disease in 1958. That diphtheria was a contributory cause of death in this case was certified after post-mortem examination. No other case of diphtheria occurred in Walsall during the year.

1,094 children under the age of 5 years, and 111 between the ages of 5 and 15 years, a total of 1,205, were immunised against the disease. 36 children received a re-inforcing or "booster" injection. The primary immunisation figure for the 5—15 age group and the number of "booster" injections compare unfavourably with the 1957 figures, but due to the pressure of the poliomyelitis vaccination campaign our normal autumn diphtheria immunisation programme will not be undertaken until after the New Year.

**Scarlet Fever.**—There were 95 cases of scarlet fever amongst school children as compared with 21 in 1957. No deaths were recorded.

**Other Diseases.**—443 school children were notified as suffering from measles, but there were no deaths. There were 75 cases of whooping cough, 18 of primary pneumonia, 5 of influenzal pneumonia and 23 of dysentery.

## 6.—SCHOOL ACCOMMODATION

(a) No. of Secondary Schools	...	...	...	...	13
County Schools	...	...	11		
Voluntary Schools	...	...	2		
(b) No. of Primary Schools	...	...	...	...	48
County Schools	...	...	34		
Voluntary Schools	...	...	4		
(c) Nursery Schools	...	...	...	...	3
(d) Reedswood Park Day Special Schools	for 60 pupils.				
(e) Beacon Residential School for Educationally Subnormal Pupils.	80 pupils.				

The number of pupils on the register at 31st December, 1958, was 20, 682, as follows: Primary and Secondary Modern Schools, 17,245; Queen Mary's Schools, 943; T. P. Riley, 724; Edward Shelley High School, 553; Joseph Leckie Secondary School, 1,033; Nursery Schools, 120; Reedswood Park, 64.

## 7.—PHYSICAL EDUCATION

My thanks are due to Mr. A. J. Spears, Physical Training Organiser for the following report on Physical Education in Schools:—

"In his last Annual Report, the Chief Medical Officer of the Ministry of Education drew attention to the fact that school children to-day are markedly better developed than in past years. In



comparable age groups they are taller and heavier and their general physical condition is better. These results have been achieved very largely through the excellent advisory and clinical work of the Health Service and through the education of the parents in ensuring proper diet and adequate rest and exercise and not least, through the good work in schools where wisely applied modern methods of physical education play an important part in securing full development with optimum growth for each individual child.

Our teachers are fully alive to the need for giving full scope to the natural play activities of the growing child for in effect, these activities, unhampered by the restrictions on free movement imposed by the school curriculum, would result in proper and natural development.

We have gone a long way in our local schools towards making appropriate provision for this enlightened approach to physical education and confidently feel that local statistics will show that we are keeping up with the national trends.

Numerically the staffing position in the schools has improved and very few schools are without keen and capable teachers to conduct the physical education work.

Walsall has always been fortunate in the number of teachers who devote so much time to what might be termed extraneous activities, which none-the-less have an important bearing on the health and well-being of the scholars. Such activities as football, cricket, swimming, boxing, hockey, dancing, athletics, netball—to mention only a few—occupy many hours of service outside school hours. The results are to be seen in the achievements of the pupils in various inter-school competitions and in competitive activities to County and National level.

In order to make the efforts of the teaching staff worthwhile, progress is being made in improving the facilities for the work. Halls and gymnasias are being equipped, playing fields improved and storage and changing arrangements adapted to simplify the general organisation for teachers in charge.

We attach considerable importance to the swimming side of our work and will continue to press for an extension of the provision to enable a much greater proportion of our school population to become swimmers. What is needed in fact is the kind of provision which will enable us to introduce children to the water from the infant schools age groups.

The 1958 session produced the highest ever number of certificate awards, although this was offset by a marked drop in the awards for Life Saving. Without doubt this was accounted for by the postponement of block examinations from July to September, a move made to relieve the great pressure on the physical education staff during the summer term. This may well have been an unwise step.

The usual summary of awards is given below with comparative figures for 1957:—

### SWIMMING.

		Boys				Girls		
		1958		1957		1958		1957
1st Class	...	67	...	46	...	44	...	40
2nd Class	...	165	...	165	...	140	...	185
3rd Class	...	220	...	233	...	145	...	137
Proficiency	...	213	...	160	...	165	...	136
Learners	...	287	...	272	...	287	...	267
Total boys and girls, 1957		...	...	...	...	1,641		
Total boys and girls, 1958		...	...	...	...	1,739		

### ROYAL LIFE-SAVING SOCIETY AWARDS.

		Boys				Girls	
		1958		1957		1958	1957
Award of Merit		2	...	1	...	2	—
Instructor	...	—	...	—	...	—	1
Scholar Instructor		—	...	—	...	—	—
Bar to Bronze							
Cross	...	1	...	3	...	1	—
Bronze Cross	...	5	...	—	...	—	2
Bar to Bronze							
Medallion	...	4	...	3	...	1	7
Bronze Medallion		11	...	31	...	31	22
Intermediate							
Certificate	...	14	...	42	...	22	40
Elementary							
Certificate	...	22	...	61	...	6	58
Unigrip Certificate		2	...	2	...	—	—
Total boys and girls, 1957		...	...	...	...	273	
Total boys and girls, 1958		...	...	...	...	124	

### A.S.A. SCHOLARS' AWARDS.

		Boys				Girls		
		1958		1957		1958		1957
Medallist	...	13	...	—	...	10	...	4
Advanced								
Award	...	3	...	—	...	1	...	—
Total boys and girls, 1957				...		...	4	
Total boys and girls, 1958				...		...	27	

## 8.—PROVISION OF MEALS AND MILK FOR SCHOOL CHILDREN

Miss R. M. Norton, Schools Meals Organiser, has been good enough to supply a report on this subject.

“The total number of school meals provided during the past year was 1,094,342 of which 899,535 were paid and 194,807 free. These figures are an increase of 68,000 over the figures for 1957 when there was an influenza epidemic.

Two new kitchens were opened last September at T. P. Riley School, both using the ‘family’ type of service. They are serving almost 50 per cent. of the children at the School.

Formica topped tables and separate chairs, together with the ‘family’ type of service have been introduced at Chuckery Senior School and Joseph Leckie Boys dining rooms. Both the boys and girls at Joseph Leckie now have equal dining facilities.

The ‘overhead’ type of heater in several dining rooms has been causing some anxiety due to the fact that they have come to the end of their active life. A new type of thermostatic time-controlled gas heater is being tried at one of the dining rooms, and it is hoped that this type will eventually replace the old ‘overhead’ heaters in the other dining rooms, giving a more satisfactory type of heat.

The ‘Milk in Schools’ scheme continues to operate satisfactorily. The latest figures as returned to the Ministry of Education and relating to a day in October are:—

Maintained Schools ... ..	17,141	one-third pints—88%
Independent Schools ... ..	505	one-third pints—84%

of the children in school on that day.

## 9.—HANDICAPPED CHILDREN

The following table shows the number of handicapped children who were in attendance at special schools (day and residential) in January, 1959:—

### DEAF.

	Boys	Girls	Total
Royal School for the Deaf, Birmingham	4	2	6
Royal West of England School for the Deaf, Exeter ... ..	—	1	1
Rangemoor Hall, Needwood (Partially Deaf) ... ..	—	2	2
Moseley Road Day School for the Deaf, Birmingham ... ..	1	—	1
The Mount Deaf School, Stoke-on-Trent	1	1	2



	Boys	Girls	Total
<b>BLIND.</b>			
Royal Institute for the Blind, Birmingham	2	2	4
Exhall Grange, Warwickshire (Partially sighted) ... ..	1	—	1
Sunshine Home Nursery School, Shrewsbury	1	—	1
<b>MALADJUSTED.</b>			
Breckenborough School, Thirsk ...	1	—	1
Shenstone Lodge (under West Bromwich L.E.A.) ... ..	1	1	2
Farmhill House, Stroud ... ..	1	—	1
Shotton Hall, Shrewsbury ... ..	1	—	1
St. Hilliards, Mickleton Manor ...	1	—	1
<b>EDUCATIONALLY SUB-NORMAL.</b>			
Beacon School, Lichfield ... ..	48	—	48
St. Francis School, Monyhull ... ..	—	7	7
Townhill Park, Southampton ... ..	—	4	4
Allerton Priory, Liverpool ... ..	—	1	1
Town Thorns School, Near Rugby ...	—	5	5
Wavendon House, Near Bletchley ...	—	2	2
<b>PHYSICALLY HANDICAPPED.</b>			
Exhall Grange, Warwickshire ... ..	—	1	1
Carlson House Day School for Spastics, Birmingham ... ..	2	1	3
St. Catherine's Home, Ventnor ... ..	1	—	1
Baskerville School, Birmingham ... ..	—	1	1
Fairfield House, Broadstairs ... ..	—	3	3
Burton Hill House, Malmesbury ... ..	—	1	1
Penhurst, Chipping Norton ... ..	1	—	1
Reedswood Park Day School ... ..	—	—	64
	67	35	166

During the year a further 81 children were ascertained to be educationally subnormal and recommended for admission to special schools. At the end of the year, the total number of children awaiting places in special schools was 211. Of this number 118 are accommodated for the time being in special classes at Harden, Busill Jones and Alumwell Primary Schools and Elmore Green Secondary School.

### Speech Therapy

In January, 1958, 99 children were receiving treatment at Littleton Street and Field Road Speech Therapy Clinics and a further 69 children began treatment during the year. The total number of attendances made by these 168 children was 2,311.

81 children were discharged during the year and 87 remained under treatment at the end of the year. At that time there was a waiting list of 84; though still a very long list this figure represents a considerable reduction compared with the previous year.

In most cases parents give willing co-operation in supervising their children's exercises at home and in ensuring that the children attend regularly at the Speech Therapy Clinic for treatment. We have again found, however, a small number of parents completely lacking in interest, the children attending spasmodically or not at all. Every opportunity has been given to them, the school nurses have visited the homes in an endeavour to persuade them to accept treatment. The Speech Therapist cannot waste time indefinitely when so many other children are anxiously awaiting treatment and 12 children have, reluctantly but necessarily, had to be removed from the list.

A very successful experiment has been carried out in one Infant School where no less than 23 children were due for treatment. The Speech Therapist has worked in the School, taking equipment with her, on one afternoon each week throughout the year. Parents have been interviewed at the school and the Headmistress and Teachers have given enthusiastic and valuable assistance with excellent results.

232 parents were interviewed at the Clinics and these contacts are invaluable for, without intelligent home co-operation, a child's rate of progress can be reduced considerably. Preliminary interviews were also arranged for parents of children on the waiting list and advice given as to how the children could best be helped during the waiting period before treatment could commence.

### **Child Guidance**

Our arrangement with West Bromwich Local Education Authority for Child Guidance services has continued, and their Educational Psychologist and Psychiatric Social Worker attend our Littleton Street Clinic two sessions weekly. Both the Educational Psychologist and Psychiatric Social Worker have visited homes and schools in Walsall.

Where necessary, children continue to attend the West Bromwich Child Guidance Clinic.

Some 41 children received treatment during the year.

Educational provision continues to be made for physically handicapped children confined either to their homes or to hospital as long-stay cases.

### **10.—BEACON RESIDENTIAL SCHOOL**

I thank Mr. W. G. Weedon, the Headmaster of the Beacon Residential School for Educationally Subnormal Children for his report on the work of the School in 1958:—

“Classroom work reached a remarkably high standard during 1958. Full credit must be given to the teaching staff who continued to fulfil routine arrangements despite staffing shortages, and also found time and energy to give that little bit ‘extra’ which makes all



the difference. Also reflected by the classroom results is the stability engendered by conscientiously followed routines and the stimulus provided by the extraneous activities and interests undertaken by the boys. Teachers and Supervision staff continue to integrate their work harmoniously and in the best interest of the boys. An interesting experiment made in March allowed 22 senior boys to journey home by themselves after breakfast on Visiting Day, with instructions to return before 6 o'clock. Each of these boys returned and from then it has been possible to relax Visiting Day rules. This action has improved parent/school relationships considerably and has also helped some boys in their attitude towards being here. Independent and favourable comment on the behaviour of our boys whilst using public transport was given by the Deputy Mayor, Councillor D. Cartwright, who happened to use the same 'bus on one occasion.

Sports Day was held on a Saturday this year and over 100 parents and friends supported the occasion. Prize giving became a separate function and was also well attended. The Christmas Show took place in traditional style, and apart from a parents' show, the school entertained 120 local Junior school children and also performed for nearly 100 friends of the school. Mention must be made of the School football team. They enjoyed a successful series and won against our rival Staffordshire School, Loxley Hall, at home and drew away.

General health has been good. More serious cases included one pneumonia, one acute nephritis (almost fatal), one suspected nephritis, two jaundice cases, and we now have three boys prone to epileptic fits. 38 boys receive two injections of Poliomyelitis vaccine, 6 boys had Specialist appointments, 3 visited Orthopædic Clinics, 42 Dental visits were made, and 15 visits to Eye Clinics. At present 23 of our boys wear spectacles. I am indebted to officers of the School Health Service who give such a personal and thorough service.

Beacon School has been visited frequently during the year. Twenty Second-year Students from Nelson Hall came. The Birmingham University Diploma Group called and left a teacher for three weeks' observation and method study. The Inspectorate called twice, and other visitors included students of child care work and teachers.

During the year Mr. Roberts, late Deputy Headmaster of Coln House, Gloucestershire, became our Senior Resident Master, and Mr. Kinsey, late Deputy Headmaster of Crooke Hall, Liverpool, has become a resident master here. Their wives have become Assistant Matron and second Assistant Matron respectively. Mr. and Mrs. Hand left us for promotion at Rhyd Court, Worcestershire, and Mr. Everitt is now Deputy Headmaster. With regret I record the sudden and untimely death of Mr. H. S. Larkin who had been a Supervision Officer here for five years. He gave us loyal service and always gave energetically of his best.

During 1958, 11 Walsall and 10 outside authority boys left on attaining the age limit, 2 boys were transferred to Secondary Modern School. Nineteen new boys were admitted, six of whom are Walsall boys."



## AGE DISTRIBUTION

	8-9	9-10	10-11	11-12	12-13	13-14	14-15	15-16	Total
Number of boys ...	5	5	7	9	10	10	15	19	80

## I.Q. DISTRIBUTION

51-60	61-70	71-80	81-83
6	40	33	1

**11.—DENTAL TREATMENT**

The Principal School Dental Officer, Mr. R. E. Morgan, L.D.S., has supplied this interesting description of the work of the School Dental Service:—

“The volume of work during the year was again very satisfactory in view of the available resources, but quite insufficient for the dental needs of the school population. Two dental officers were available against an establishment of six necessary for continuous and adequate treatment. The situation is a national one, but is more acute in industrial areas. Provision has been made for any possible improvement in the service by the installation of a new clinic, fully equipped, and the modernisation of existing clinics. Good accommodation and up-to-date equipment are not only essential for the development of an efficient service, but also have an important bearing on the attitude of potential candidates for appointment. In the coming year there will be a slightly improved situation, a part-time officer being available for a short period.

Dental inspections during the year numbered 6,722, of which 1,119 were emergency cases. The incidence of caries remained high, 76 per cent. of patients seen requiring attention, compared with a national average of 70 per cent. However, the prevalence of dental disease was a little lower than the previous year, due to the policy of providing annual inspection, with any necessary treatment, to a limited number of schools. Under this scheme, it is hoped gradually to increase the number of pupils receiving systematic attention, as less time is required for dental defects where regular routine treatment is available. With the increasing prevalence of dental disorders, both local and general, I would again stress the fluoridation of water supplies as a preventative measure. The addition of minute amounts of fluorides would show a reduction in caries of 50 per cent. or more in children up to 8 years of age, with a long period of immunity. Older children, too, would have their dental condition considerably improved by the intake of fluorides.

Conservative treatment comprised 2,848 fillings, with 2,097 teeth saved, while extractions numbered 1,129 permanent and 5,387 temporary teeth. The ratio of permanent teeth saved to those extracted remained stable, but any material improvement is only possible by more frequent inspection and treatment. Steady progress continued in the Maternity and Child Welfare sphere, the work comprising conservative, operative and prosthetic treatment. Acceptances were very good, 110 expectant and nursing mothers

receiving attention, including the fitting of 38 dentures, while 52 pre-school children attended for extractions. The services of the Birmingham Dental and Manor Hospitals were again used in connection with special cases involving mal-occlusion and where X-ray diagnosis was necessary. Regulation appliances were required for 57 pupils, while many others received corrective treatment by extraction of misplaced teeth.

I would thank Mrs. Miller and the staff for their work and co-operation during the year."

## 12.—HEALTH EDUCATION

The school medical inspection provides a good opportunity for imparting advice on the preservation of health. The experienced doctor can teach health during this interview almost without the boy or girl being aware of what is happening, and though the days are past when a doctor was regarded as *sedes sapientiae* there can be little doubt that his or her remarks carry as much weight as an intensive posters campaign. This is not to disparage the poster as a weapon in the battle for health, but merely an aid to preserving a sense of proportion in this age of "punch lines" and eye-catching illustrations. There are numerous topics which can be taken up and various techniques which can be employed. Worthy of mention is information on the relationship between smoking and lung cancer for the school leavers, and it is planned to link this with the display of a most apt poster at the sessions.

The well-established courses of lectures to senior schoolgirls have continued on an increased scale during the year under review. Under the direction of the Superintendent Health Visitor, nursing staff have given 10 courses on hygiene and mothercraft, involving 84 lectures in all. At the ensuing examinations, the girls obtained 89 first-class and 58 second-class certificates.

Two talks have been given to parent-teacher groups. The small number quoted is no indication of lack of willingness on my part to provide lecturers and I should be pleased to see a considerable expansion of this aspect of our work in health education.

## 13.—CONCLUSION

This report would be incomplete without my expressing sincere thanks to the Education Committee, the Director of Education and his staff, and to the headmasters and headmistresses of the Walsall schools. Their co-operation has done much to facilitate the smooth running of the Service, as, indeed, has the very sound work of doctors, nurses and administrative staff, to whom, also, I extend my warm thanks.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

THOMAS ROSS,

Principal School Medical Officer.



# MEDICAL INSPECTION AND TREATMENT RETURNS

Year ended 31st December, 1958

## PART 1

### Medical Inspection of Pupils Attending Maintained and Assisted Primary and Secondary Schools (including Nursery and Special Schools)

#### A. PERIODIC MEDICAL INSPECTIONS.

Age Groups (Year of Birth)	Number of pupils Inspected	Physical Condition of Pupils Inspected			
		Satisfactory		Unsatisfactory	
		No.	% of col. 2	No.	% of col. 2
(1)	(2)	(3)	(4)	(5)	(6)
1954 and later	201	201	100	—	—
1953 ...	1,539	1,523	98.96	16	1.04
1947 ...	1,793	1,769	98.66	24	1.34
1945 ...	801	786	98.13	15	1.87
1943 and earlier	1,509	1,493	98.94	16	1.06
Total ...	5,843	5,772	98.78	71	1.22

#### B. PUPILS FOUND TO REQUIRE TREATMENT AT PERIODIC MEDICAL INSPECTION.

(excluding Dental Diseases and Infestation with Vermin)

Age Groups Inspected (Year of Birth)	For defective vision (exclud- ing squint)	For any other conditions recorded in Part II	Total individual pupils
(1)	(2)	(3)	(4)
1954 and later ...	1	16	16
1953 ...	4	172	173
1947 ...	82	263	322
1945 ...	64	127	183
1943 and earlier ...	121	193	296
Total ...	272	771	990



## C. OTHER INSPECTIONS.

Number of Special Inspections	...	...	...	2,911
Number of Re-Inspections	...	...	...	1,417
			Total	...
				<u>4,328</u>

## D. INFESTATION WITH VERMIN.

(i)	Total number of examinations in the schools by the school nurses or other authorized persons	...	...	61,037
(ii)	Total number of individual pupils found to be infested			1,708
(iii)	Number of individual pupils in respect of whom cleansing notices were issued	...	...	...
(iv)	Number of individual pupils in respect of whom cleansing orders were issued	...	...	...

## PART II

DEFECTS FOUND BY MEDICAL INSPECTION DURING  
THE YEAR.

## A. PERIODIC INSPECTIONS.

Defect or Disease	PERIODIC INSPECTIONS				Others		Total	
	Entrants		Leavers					
	Requiring Treatment	Requiring Observation	Requiring Treatment	Requiring Observation	Requiring Treatment	Requiring Observation	Requiring Treatment	Requiring Observation
Skin ... ..	16	36	64	31	64	72	144	139
Eyes—a. Vision ...	4	8	121	124	147	166	272	298
b. Squint ...	23	14	2	5	8	34	33	53
c. Other ...	4	6	4	3	22	25	30	34
Ears—a. Hearing ...	—	11	5	6	12	32	17	49
b. Otitis Media	13	53	13	34	11	126	37	213
c. Other ...	8	2	47	5	76	19	131	26
Nose and Throat ...	52	63	17	45	57	203	126	311
Speech ... ..	18	17	—	2	8	22	26	41
Lymphatic Glands ...	2	13	—	2	8	48	10	63
Heart ... ..	1	16	2	11	1	61	4	88
Lungs ... ..	22	45	1	15	12	48	35	108
Developmental—								
a. Hernia ...	2	9	—	1	—	4	2	14
b. Other ...	5	31	3	13	8	53	16	97
Orthopædic—								
a. Posture ...	5	24	4	16	36	95	45	135
b. Feet ...	—	18	5	20	32	59	37	97
c. Other ...	5	33	18	34	36	82	59	149
Nervous System—								
a. Epilepsy ...	2	6	1	4	—	9	3	19
b. Other ...	—	4	3	6	—	19	3	29
Psychological—								
a. Development	3	20	3	4	4	18	10	42
b. Stability ...	15	13	7	6	23	26	45	45
Abdomen ... ..	1	11	—	6	3	8	4	25
Other ... ..	4	27	14	22	29	48	47	97

## B. SPECIAL INSPECTIONS.

Defect or Disease	SPECIAL INSPECTIONS	
	Requiring Treatment	Requiring Observation
Skin ... ..	180	13
Eyes—		53
a. Vision ...	49	
b. Squint ...	9	5
c. Other ...	64	10
Ears—		3
a. Hearing ...	37	
b. Otitis Media	73	8
c. Other ...	39	—
Nose and Throat ...	148	49
Speech ... ..	10	4
Lymphatic Glands ...	20	8
Heart ... ..	11	2
Lungs ... ..	52	5
Developmental—		
a. Hernia ...	2	—
b. Other ...	11	15
Orthopædic—		
a. Posture ...	20	39
b. Feet ...	17	16
c. Other ...	132	11
Nervous System—		
a. Epilepsy ...	3	1
b. Other ...	34	2
Psychological—		
a. Development	9	3
b. Stability ...	90	6
Abdomen ... ..	5	1
Other ... ..	401	11



**PART III****TREATMENT TABLES****A. EYE DISEASES, DEFECTIVE VISION AND SQUINT.**

	No. of cases known to have been dealt with
External and other, excluding errors of refraction and squint ... ..	64
Errors of Refraction (including squint) ...	900
Total ...	<hr/> 964 <hr/>
No. of pupils for whom spectacles were prescribed ... ..	730

**B. DISEASES AND DEFECTS OF EAR, NOSE AND THROAT.**

	No. of cases known to have been dealt with
Received operative treatment:—	
(a) for diseases of the ear ... ..	3
(b) for adenoids and chronic tonsillitis	273
(c) for other nose and throat conditions	3
Received other forms of treatment ...	12
Total ...	<hr/> 291 <hr/>

Total number of pupils in Schools who are known  
to have been provided with hearing aids:—

(a) In 1958 ... ..	2
(b) In previous years ... ..	2

**C. ORTHOPÆIC AND POSTURAL DEFECTS.**

	No. of cases known to have been treated
(a) Pupils treated at Clinics or Out-patient Departments ... ..	750
(b) Pupils treated at school for postural defects ... ..	<hr/>
Total ...	<hr/> 750 <hr/>

D. DISEASES OF THE SKIN  
(excluding Uncleanliness for which see Part I, D).

							No. of cases known to have been treated
Ringworm—							
(i) Scalp	...	...	...	...	...	...	—
(ii) Body	...	...	...	...	...	...	—
Scabies	...	...	...	...	...	...	18
Impetigo	...	...	...	...	...	...	149
Other skin diseases	...	...	...	...	...	...	268
Total						...	<hr/> 435 <hr/>

E. CHILD GUIDANCE TREATMENT.

							No. of cases known to have been treated
Pupils treated at Child Guidance Clinics	...	...	...	...	...	...	41

F. SPEECH THERAPY.

							No. of cases known to have been treated
Pupils treated by Speech Therapists	...	...	...	...	...	...	168

G. OTHER TREATMENT GIVEN.

							No. of cases known to have been dealt with
(a) Pupils with minor ailments	...	...	...	...	...	...	893
(b) Pupils who received convalescent treatment under School Health Service arrangements	...	...	...	...	...	...	155
(c) Pupils who received B.C.G. Vaccination	...	...	...	...	...	...	—
(d) other than (a), (b) and (c)—							
(i) Minor Eye Defects	...	...	...	...	...	...	54
(ii) Minor Ear Defects	...	...	...	...	...	...	46
(iii) Post-Tonsillectomy Breathing Exercises	...	...	...	...	...	...	209
Total						...	<hr/> 1,357 <hr/>

## PART IV

## DENTAL INSPECTION AND TREATMENT

(1) Number of pupils inspected by the Authority's Dental Officers—						
(a) At Periodic Inspections	...	...	...	...	5,603	
(b) As Specials	...	...	...	...	1,119	
TOTAL	...	...	...	...	—	6,722
(2) Number found to require treatment						
	...	...	...	...	5,114	
(3) Number offered treatment						
	...	...	...	...	4,335	
(4) Number actually treated						
	...	...	...	...	2,820	
(5) Attendances made by pupils for treatment						
	...	...	...	...	4,252	
(6) Half days devoted to:—						
(a) Periodic (School) Inspection	...	...	...	...	28	
(b) Treatment	...	...	...	...	675	
TOTAL	...	...	...	...	—	703
(7) Fillings:—						
Permanent Teeth	...	...	...	...	2,824	
Temporary Teeth	...	...	...	...	24	
TOTAL	...	...	...	...	—	2,848
(8) No. of teeth filled:—						
Permanent Teeth	...	...	...	...	2,076	
Temporary Teeth	...	...	...	...	21	
TOTAL	...	...	...	...	—	2,097
(9) Extractions:—						
Permanent Teeth	...	...	...	...	1,129	
Temporary Teeth	...	...	...	...	5,387	
TOTAL	...	...	...	...	—	6,516
(10) Administration of general anæsthetics for extraction						
	...	...	...	...	2,377	
(11) Orthodontics:—						
(a) Cases commenced during the year	...	...	...	...	59	
(b) Cases carried forward from previous year	...	...	...	...	—	
(c) Cases completed during the year	...	...	...	...	—	
(d) Cases discontinued during the year	...	...	...	...	—	
(e) Pupils treated with appliances	...	...	...	...	—	
(f) Removable appliances fitted	...	...	...	...	—	
(g) Fixed appliances fitted	...	...	...	...	—	
(h) Total attendances	...	...	...	...	—	
(12) Number of pupils supplied with artificial teeth						
	...	...	...	...	6	
(13) Other operations:—						
Permanent Teeth	...	...	...	...	423	
Temporary Teeth	...	...	...	...	44	
	...	...	...	...	—	467



